

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47098

FILED
Apr 24, 2006
Secretary of State

Entity Name: LOCH LOMOND HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

6805 GLENEAGLE DR
MIAMI LAKES, FL 33014

New Principal Place of Business:

16015 WEST PRESTWICK PLACE
MIAMI LAKES, FL 33014

Current Mailing Address:

6805 GLENEAGLE DR
MIAMI LAKES, FL 33014

New Mailing Address:

16015 WEST PRESTWICK PLACE
MIAMI LAKES, FL 33014

FEI Number: 65-0309211

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, KIMBERLY
6805 GLENEAGLE DR
MIAMI LAKES, FL 33014 US

Name and Address of New Registered Agent:

VARGA, ALEXANDER
16015 WEST PRESTWICK PLACE
MIAMI LAKES, FL 33014 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ALEXANDER VARGA

04/24/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MILLER, KIMBERLY
Address: 6805 GLENEAGLE DR
City-St-Zip: MIAMI LAKES, FL 33014

Title: DV () Delete
Name: DIAZ, ANGEL
Address: 15900 WEST TROON CIRCLE
City-St-Zip: MIAMI LAKES, FL 33014

Title: DT () Delete
Name: VARGA, LAUREEN
Address: 16015 W PRESTWICK PL
City-St-Zip: MIAMI LAKES, FL 33014

Title: DS (X) Delete
Name: MIRTHA, MENDEZ
Address: 7000 GLENEAGLE DRIVE
City-St-Zip: MIAMI LAKES, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: DIAZ, ANGEL
Address: 15900 WEST TROON CIRCLE
City-St-Zip: MIAMI LAKES, FL 33014

Title: DT (X) Change () Addition
Name: VARGA, ALEXANDER
Address: 16015 WEST PRESTWICK PLACE
City-St-Zip: MIAMI LAKES, FL 33014

Title: DS (X) Change () Addition
Name: MENDEZ, MIRTHA
Address: 7000 GLENEAGLE DRIVE
City-St-Zip: MIAMI LAKES, FL 33014

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALEXANDER VARGA

DT

04/24/2006

Electronic Signature of Signing Officer or Director

Date