

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 27, 2007  
Secretary of State**

DOCUMENT# N47098

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

**Current Principal Place of Business:**

16015 WEST PRESTWICK PLACE  
MIAMI LAKES, FL 33014

**New Principal Place of Business:**

**Current Mailing Address:**

16015 WEST PRESTWICK PLACE  
MIAMI LAKES, FL 33014

**New Mailing Address:**

FEI Number: 65-0309211      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

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

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

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

01/27/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date