

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000131143

Entity Name: 27 LOCKWOOD, INC.

FILED
Jan 08, 2009
Secretary of State

Current Principal Place of Business:

4779 TIVOLI PL
SARASOTA, FL 342353649

New Principal Place of Business:

Current Mailing Address:

4779 TIVOLI PL
SARASOTA, FL 342353649

New Mailing Address:

FEI Number: 90-0068044

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAROTTO, DANTE M
4779 TIVOLI PLACE
SARASOTA, FL 342353649 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: CZEISLER, LUDWIG
Address: 4779 TIVOLI PLACE
City-St-Zip: SARASOTA, FL 342353649

Title: DVS () Delete
Name: CZEISLER, CARMEN
Address: 4779 TIVOLI PLACE
City-St-Zip: SARASOTA, FL 342353649

Title: D () Delete
Name: ALEJANDRO, CZEISLER
Address: 4779 TIVOLI PLACE
City-St-Zip: SARASOTA, FL 342353649

Title: D () Delete
Name: CZEISLER, CATHERINE
Address: 4779 TIVOLI PL
City-St-Zip: SARASOTA, FL 342353649

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:

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

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUDWIG CZEISLER

PRES

01/08/2009

Electronic Signature of Signing Officer or Director

Date