

# 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