

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768999

Entity Name: L.O.V.O. CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**U.S. 192 WEST
7770 W IRLO BRONSON MEM HWY
KISSIMMEE, FL 34747**Current Mailing Address:**DAILY MANAGEMENT, INC
P.O. BOX 730119
ORMOND BEACH, FL 32173-0119 US**FEI Number:** 59-2942714**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CRAMER, DAVID A
DAILY MANAGEMENT, INC.
333 BILL FRANCE BLVD
DAYTONA BEACH, FL 32114 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:** DAVID A. CRAMER

05/31/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :Title SECRETARY
Name STEWART, STEPHEN D
Address 217 RUMSEY ROAD
APT 1A
City-State-Zip: YONKERS NY 10705Title VP
Name SHEMANCIK, THOMAS E
Address 1311 HAMLIN DR
City-State-Zip: CLEARWATER FL 33764Title DIRECTOR
Name DOLLOFF, HAROLD
Address 4355 S.E. 140TH STREET
City-State-Zip: SUMMERFIELD FL 34491Title PRESIDENT
Name BLAISSE, LAWRENCE W
Address 200 LOGANBERRY LANE
City-State-Zip: REHOBOTH BEACH DE 19971Title TREASURER
Name RIPANI, ALBERT JR.
Address 3110 E DAVID DRIVE
City-State-Zip: BLOOMINGTON IN 47401

I hereby 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 all other like empowered.

SIGNATURE: BLAISSE , LAWRENCE W

PRESIDENT

05/31/2019

Electronic Signature of Signing Officer/Director Detail

Date