2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704466

Entity Name: LARGO SOUND PARK CLUB INC

FILED Apr 12, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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52 SHORELAND DRIVE KEY LARGO, FL 33037

Current Mailing Address: New Mailing Address:

P.O. BOX 3244 KEY LARGO, FL 33037

FEI Number: 59-2004839 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BLOODWORTH, ROSS
3 SNAPPER AVE
KEY LARGO, FL 33037 US
LOCKE, LOWELL
51 SE MARLIN AVE
KEY LARGO, FL 33037 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: LOWELL LOCKE 04/12/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD () Delete Title: TD (X) Change () Addition

 Name:
 CLIFTON, RONALD
 Name:
 SCHWITZER, DEBRA

 Address:
 55 SE MARLIN AVE
 Address:
 52 TRANSYLVANIA AVE

 City-St-Zip:
 KEY LARGO, FL 33037
 City-St-Zip:
 KEY LARGO, FL 33037

Title: PDC () Delete Title: PDC (X) Change () Addition Name: BLOODWORTH, ROSS Name: LOCKE, LOWELL

Address: 3 SNAPPER AVE. Address: 51 SE MARLIN AVE
City-St-Zip: KEY LARGO, FL 33037 City-St-Zip: KEY LARGO, FL 33037

Title: VD () Delete Title: VD (X) Change () Addition Name: LOCKE, LOWELL Name: SCHWITZER, BUTCH

 Address:
 51 SE MARLIN AVE
 Address:
 52 TRANSYLVANIA AVE

 City-St-Zip:
 KEY LARGO, FL 33037
 City-St-Zip:
 KEY LARGO, FL 33037

Title: SD () Delete Title: () Change () Addition

 Name:
 LOCKE, SANDY
 Name:

 Address:
 51 SE MARLIN AVE
 Address:

 City-St-Zip:
 KEY LARGO, FL 33037
 City-St-Zip:

Title: D (X) Delete Title: () Change () Addition

 Name:
 DYKES, LISA
 Name:

 Address:
 45 SNAPPER AVE.
 Address:

 City-St-Zip:
 KEY LARGO, FL 33037
 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: DEBRA SCHWITZER TD 04/12/2006