

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 04, 2011
Secretary of State

Entity Name: LONGBOAT ARMS ASSOCIATION, INC.

Current Principal Place of Business:

LONGBOAT ARMS ASSOCIATION, INC.
3330 GULF OF MEXICO DR #203-D
LONGBOAT KEY, FL 342282820

New Principal Place of Business:

Current Mailing Address:

575 BAY ISLES RD. #200
LONGBOAT KEY, FL 34228

New Mailing Address:

FEI Number: 59-1417083

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BETH CALLANS MANAGEMENT
575 BAY ISLES RD. #200
LONGBOAT KEY, FL 34228 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: T
Name: HALLWORTH, SUSAN
Address: 3330 GULF OF MEXICO DR C 303
City-St-Zip: LONGBOAT KEY, FL 34228

Title: P
Name: WEXLER, LOUIS
Address: 3330 GULF OF MEXICO DR #201C
City-St-Zip: LONGBOAT KEY, FL 34228

Title: VP
Name: SITTIG, MARY K
Address: 3228 GULF OF MEXICO DR #103C
City-St-Zip: LONGBOAT KEY, FL 34228

Title: S
Name: LETOURNEAU, ELLEN
Address: 3330 GULF OF MEXICO DR. #108C
City-St-Zip: LONGBOAT KEY, FL 34228

Title: D
Name: EAGLETON, JACK
Address: 3220 GULF OF MEXICO DRIVE #302C
City-St-Zip: LONGBOAT KEY, FL 34228

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: LOUIS WEXLER

P

01/04/2011

Electronic Signature of Signing Officer or Director

Date