

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2001 8:00 am
Secretary of State

09-12-2001 90017 050 ****61.25

0014257

DOCUMENT # 716009
 1. Entity Name
LONGBOAT KEY TOWERS ASSOCIATION, INC.

Principal Place of Business Mailing Address
601-603 LONGBOAT CLUB ROAD **601-603 LONGBOAT CLUB ROAD**
LONGBOAT KEY FL 34228 **LONGBOAT KEY FL 34228**

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State

Zip Country Zip Country

4. FEI Number **59-1311340** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
SEIGLE, SAUL
603 LONGBOAT CLUB ROAD
APT. #501-N
LONGBOAT KEY FL 34228

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
 Signature, typed or printed name of registered agent and title if applicable.

FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME	P SEIGLE, SAUL <input type="checkbox"/> Delete
STREET ADDRESS	603 LONGBOAT CLUB ROAD
CITY-ST-ZIP	LONGBOAT KEY FL
TITLE NAME	D ROSE, EDWIN D <input type="checkbox"/> Delete
STREET ADDRESS	601 LONGBOAT CLUB RD
CITY-ST-ZIP	LONGBOAT KEY FL
TITLE NAME	RUBENSTEIN, PAUL B <input type="checkbox"/> Delete
STREET ADDRESS	601 LONGBOAT CLUB ROAD
CITY-ST-ZIP	LONGBOAT KEY FL 34228
TITLE NAME	V JOUTRAS, RICHARD <input type="checkbox"/> Delete
STREET ADDRESS	603 LONGBOAT CLUB ROAD
CITY-ST-ZIP	LONGBOAT KEY, FL 00000
TITLE NAME	AT KENT, RALPH E <input checked="" type="checkbox"/> Delete
STREET ADDRESS	603 LONGBOAT CLUB RD
CITY-ST-ZIP	LONGBOAT KEY FL
TITLE NAME	D LEVITES, DOROTHY <input checked="" type="checkbox"/> Delete
STREET ADDRESS	601 LONGBOAT CLUB RD
CITY-ST-ZIP	LONGBOAT KEY FL 34228

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	
TITLE NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	DIRECTOR FREDERICK CHEN, FREDERICK
CITY-ST-ZIP	603 LONGBOAT CLUB RD. LONGBOAT KEY, FL
TITLE NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	SECRETARY SVERDLOW, ALICE M.
CITY-ST-ZIP	601 LONGBOAT CLUB RD LONGBOAT KEY, FL

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other duly empowered.

SIGNATURE: **SAUL SEIGLE, PRES.** 9/05/2001 (941) 383-8110

CR2E037 (5/01)