

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 09, 2005 8:00 am**  
**Secretary of State**

08-09-2005 90003 012 \*\*\*\*61.25

<b>DOCUMENT # 723060</b>	
1. Entity Name LONGBOAT HARBOUR OWNERS ASSOCIATION, INC.	



Principal Place of Business 4454 GULF OF MEXICO DRIVE LONGBOAT KEY, FL 34228	Mailing Address 4454 GULF OF MEXICO DRIVE LONGBOAT KEY, FL 34228
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**50060736**



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

08012005 Chg-NP CR2E037 (10/03)

4. FEI Number 59-1390793	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
MCKAY, TELESE B ESQ MCKAY LAW FIRM, P.A. 2055 WOOD ST STE 120 SARASOTA, FL 34237	

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

Filing Fee is \$61.25 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD AIRTH, HANK 4320 FALMOUTH DRIVE LONGBOAT KEY, FL 34228 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/> HARR, Florence 4440 Exeter Dr. Longboat Key, FL 34228
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD WILLIAMS, SCOTT 4400 EXETER DRIVE LONGBOAT KEY, FL 34228 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD BOCK, JOHN 4420 EXETER LONGBOAT KEY, FL 34228 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FISCHBEIN, AL 4320 FALMOUTH DRIVE LONGBOAT KEY, FL 34228 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD GIORDANO, ERNIE 4390 EXETER DR LONGBOAT KEY, FL 34228 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MARK, FLORENCE 4440 EXETER DRIVE LONGBOAT KEY, FL 34228 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>

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 like empowered.

SIGNATURE: Henry B. Airth, Jr. HENRY B. AIRTH, JR. 8/5/05 941-383-212