200	2 ONIFONNI BUS	INESS REPU	DI (AÈ	·주/	•			
DOCUMENT # 757599 1. Entity Name					, FILED			
LONGBOAT BAY CLUB CONDOMINIUM ASSOCIATION, INC.					02 DEC 12 PM 1:0!			
Principal Place of Business Mailing Address					SECRETARY OF S	TATE		
3200 GULF OF MEXICO DRIVE LONGBOAT KEY FL 34228-2806		3200 GULF OF MEXICO DRIVE LONGBOAT KEY FL 34228-2806		60	TALLAHASSEE FLO 0009213 0201095002	ORIDA 1 736	25	
2. Principal Place of Business		3. Mailing Address 1030 Seaside Drive		re merunia				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		nend	BO NOT WRITE IN TH	HIS SPACE Z		
City & State		City & State Sarasota FL		4. FEI Number	65-0026175		plied For at Applicable	
Zip	Country 6. Name and Address of Current	Zip 34242	Country USF		Status Desired	\$8.75 Add Fee Required	ditional d	
or Hame and Address of Outfort Hegistered Agont								1
LOVE, WILLIAM J 6649 WESTWOOD BLVD SUITE 500 ORALNDO FL 32821				Street Address (P.O. Box Number is Not Acceptable) 10.30 Seaside Orive City Sarasota FL Zip Code 34242				
· · · · ·	Signature, typed or printed name of registered agen After September 13, 2002, min. will be \$236.25.		npaign Financing	\$5.00 May Be Added to Fees		eck Payable to		
10.	OFFICERS AND DI	RECTORS	11.	ADDITIONS/CHAN	J NGES TO OFFICERS AND	DIDECTORS IN	10	ĺ
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MASTENBROEK, HENK 6516 BAYOU HAMMOCK LONGBOAT KEY FL 34228	Na Delete	TITLE NAME	President D Pamela Merric 330 Packetts La Fairport NY	ek	Change	Addition	00007 (4/00)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV SMITH, ROY 1510 SOUTH TUTTLE AVE SARASOTA FL 34239	⊠ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Andrew Vac	ſ	™ Change S	Addition	Š
TITLE NAME STREET ADDRESS* CITY-ST-ZIP **	DST KLEIMAN, TOM 1760 MARKET ST FL 4 PHILADELPHIA PA 19103	Delete	NAME -STREET ADDRESS CITY-ST-ZIP	Karen Morin	Trail Suite 30		- Addition	-
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FINEAULETIN FA 19103	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		- "	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		€ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		182 's	Change	☐ Addition	
TITLE Name Street adoress City-St-Zip		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		7000	Change	Addition	

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. KEQUIFRAMICA L. Merrick 11/4/02 585 2231490 SIGNATURE: \