

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757599

FILED  
Jan 16, 2004  
Secretary of State

**Entity Name:** LONGBOAT BAY CLUB CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3200 GULF OF MEXICO DRIVE  
LONGBOAT KEY, FL 342282806

**New Principal Place of Business:**

**Current Mailing Address:**

1030 SEASIDE DRIVE  
SARASOTA, FL 34242

**New Mailing Address:**

**FEI Number:** 65-0026175

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CUNNINGHAM, SHARON  
1030 SEASIDE DRIVE  
SARASOTA, FL 34242 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: PD ( ) Delete  
Name: MERRICK, PAMELA  
Address: 330 PACKETTS LANDING  
City-St-Zip: FAIRPORT, NY 14450

Title: TD ( ) Delete  
Name: VAC, ANDREW  
Address: 510 BAY ISLE DR  
City-St-Zip: LONGBOAT KEY, FL 34228

Title: DS ( ) Delete  
Name: MORINELLI, KAREN  
Address: 2 N TAMiami TRAIL, SUITE 303  
City-St-Zip: SARASOTA, FL 34236

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PAMELA MERRICK

PD

01/16/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date