2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N05000004165

1. Entity Name

NEPTUNE ON LONGBOAT KEY CONDOMINIUM ASSOCIATION, INC.



FILED Mar 21, 2008 08:00 A Secretary of State

Principal Place of Business

2850 GULF OF MEXICO LONGBOAT KEY, FL 34228

Mailing Address

POB 15684 SARASOTA, FL 34277



DO NOT WRITE IN THIS SPACE

03192008 No Chg-NP CR

CR2E037 (4/06)

4. FEI Number 30-0312950

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ZABIK, DIANE 1060 BECKLEY CIR VENICE, FL 34292

DO NOT WRITE IN THIS SPACE

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				e required when reinstating)	DATE
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution.	, 	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-SI-ZIP	S ABIK, DIANE 060 BECKLEY CIR ENICE, FL 34292				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPDT TOPJUN, COLBY 1747 RIVIERA CIR SARASOTA, FL 34232		U00000866435		
TITLE NAME STREET ADDRESS CITY-SI-ZIP	S ROSS, JESSICA 800 OAK BEND WAY SARASOTA, FL 34231			DO	04/08/08-80028-019 61.25 NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

NAME STREET ADDRESS CITY-ST-ZIP

STATURE AND TYPES OR PRENTED NAME OF BIGNING OFFICER OR DIRECTOR

7-19-2008

Day