FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997 DOCUMENT #

N07935

(2)

LONGWOOD RUN COMMU	NITY ASSOCIATION, INC.				
Principal Place of Business	Mailing Address			T ORIGINIAL DEL ARVIV ORDIR VOLDO DIVIDI	SAAL ONDIT BIBIT OTBAL ONDIE BIONE HIDIT ANDE
ALL FLORIDA SERVICES 2831 RINGLING BLVD STE 218-F 28437 SARASOTA FL 34237 2851 RINGLING BLVD STE 24237-5554		218-F			
US	U\$			3. Date Incorporated or Qualified 03/04/1985	3a. Date of Last Report 06/24/1996
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21	26			59-2654885	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	7.11.1		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State			6. Election Campaign Financing	\$5.00 May Be
23	28	T 02-1-1		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country		8. This corporation has tiability for in	
24 25 S Name and Address of	[29] of Current Registered Agent	30		Florida Statutes 10. Name and Address of New Reg	Yes No
81 Name					
QULP COAST MANAGEMENT	deleti	A Charact	All Florida Services, Inc		
ALL FLORIDA SERVICES 2831 RINGLING BLVD., STE 218-F SARASOTA FL 34237		82 Street	Street Address (P.O. Box Number is Not Acceptable) delete Gulf Coast Management		
		63			
		84 City	 -		FL 85 Zip Code
11. Pursuant to the provisions of Sections	617,0502 and 617,1508, Florida Statut	es, the above-named	corpora	tion submits this statement for the p	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registe agent, I am familiar with, and accept the obligation of, Section 617.0503, Florida Statutes.					t the appointment as registered
SIGNATURE CLUWER	1300 W			4/	<i>12</i> 8/97
Stoneldig, typed or printed name of re		E: Registered Agent signature	required w		DATE
	CERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12 Change Addition
TITLE PD NAME WINDING, JIM	C OFFEE	1.1 TITLE 1.2 NAME			Change C Acoulon
STREET ADDRESS 5761 BEAURIVANE		1.3 STREET ADDRESS			
CITY-ST-ZIP SARASOTA FL 34243	•	1.8 STREET ADDRESS			
TITLE VD		1 A PITY ST. 2IP			
10		1.4 CITY-ST-ZIP 2.1 TITLE			Change Addition
NAME JOHNSON, CATHERIA	DELETE	2.1 TITLE	D	Janet Christian	
NAME JOHNSON, CATHERIN STREET ADDRESS 4520 ASCOT CIRCLE	DELETE NE		D	Janet Christian 4431 Ascot Circl	
STREET ADDRESS 4520 ASCOT CIRCLE	NE NORTH	2.1 TITLE 2.2 NAME	D	Janet Christian 4431 Ascot Circl Sarasota, F1 342	
STREET ADDRESS 4520 ASCOT CIRCLE	NE NORTH	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	D	4431 Ascot Circl Sarasota, F1 342	
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	NE NORTH	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE		4431 Ascot Circl Sarasota, F1 342 Susan Miller 6056 Marella	E SO 235 ☐ Change ☐ Addition
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14. I do 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 annual report or supplemental annual 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 12 or Block 13 If changed, or on an attachment with an address.

FILED

Jun 16 1997 8:00am

Secretary of State