


FILE NOW: FILING FEE IS \$61.25

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Mar 29, 1999 8:00 am
Secretary of State

03-29-1999 90022 002 ****61.25

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N27055

1. Corporation Name

LONG COMMON CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

5037 RINGWOOD MEADOW
 SARASOTA FL 34235

Mailing Address

5037 RINGWOOD MEADOW
 SARASOTA FL 34235



2. Principal Place of Business		2a. Mailing Address	3. Date Incorporated or Qualified
21		26	06/21/1988
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22		27	4. FEI Number
City & State		65-0070004	
23		28	Applied For
Zip		Not Applicable	
24	25	29	5. Certificate of Status Desired <input type="checkbox"/>
Country	Country	30	\$8.75 Additional Fee Required
			6. Election Campaign Financing <input type="checkbox"/>
			Trust Fund Contribution
			\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

~~HARROWER, LEWIS~~
~~6639 E LONG COMMON CT~~
~~SARASOTA FL 34235~~

10. Name and Address of New Registered Agent

81 Name **DIANE ROYSEANT, dmc.**
 82 Street Address (P.O. Box Number is Not Acceptable)
4840 Sunday Ct
 83
 84 City **Sarasota** FL 85 Zip Code **34235**

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 registered 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 registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Rebecca Stobole DATE: 3/25/99
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LYTLE, SHIRLIANNE	1.2 NAME	DT
STREET ADDRESS	5649 E LONG COMMON CT	1.3 STREET ADDRESS	Ken Kay
CITY-ST-ZIP	SARASOTA FL 34235	1.4 CITY-ST-ZIP	5657 Long Common
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	Sarasota, Fl 34235 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARROWER, LEWIS E II	2.2 NAME	DP
STREET ADDRESS	5639 E LONG COMMON CT	2.3 STREET ADDRESS	G.W. Churton
CITY-ST-ZIP	SARASOTA FL	2.4 CITY-ST-ZIP	5683 Long Common
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	Sarasota, Fl. 34235 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KEARNEY, JACK	3.2 NAME	DVP
STREET ADDRESS	4533 LONG COMMON CT	3.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL 34235	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	DS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TONER, EDWARD	4.2 NAME	Vic Pathe
STREET ADDRESS	5614 W LONG COMMON	4.3 STREET ADDRESS	5662 Long Common
CITY-ST-ZIP	SARASOTA FL	4.4 CITY-ST-ZIP	Sarasota, Fl. 34235
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHNSON, ALAN	5.2 NAME	
STREET ADDRESS	4492 W. LONG COMMON	5.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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, with all other like empowered.

SIGNATURE: Kenneth H. Kay DATE: 3/25/99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E037 (1/98)