

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2001 8:00 am
Secretary of State

01-31-2001 90325 026 ****61.25

DOCUMENT # N27055

1. Entity 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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0070004

Applied For
 Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

ROYSE, DIANE
4840 SUNDAY CT.
SARASOTA FL 34235

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution.

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	NAME	TITLE	NAME
DT	KAY, KEN		
5657 LONG COMMON	SARASOTA FL 34235		
DP	CHURTON, G.W.		
5683 LONG COMMON	SARASOTA FL 34235		
DVP	LARSON, GERALD	DVP	Jean Zucchelli
5600 LONG COMMON	SARASOTA FL 34235		5589 E. Long Common
			Sarasota, FL 34235
		S	Gerald Larson
			5600 Long Common
			Sarasota, FL 34235
		D	Bob Warnock
			4444 Long Common
			Sarasota, FL 34235

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.

SIGNATURE:

SIGNATURE REQUIRED
 G.W. CHURTON
 PRESIDENT

Date

Daytime Phone #

1/17/01

CR2E037 (10/00)