

NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2004 8:00 am
Secretary of State

02-27-2004 90023 043 ****61.25

DOCUMENT # N31957

Entity Name
THE SANCTUARY AT LONGBOAT KEY CLUB COMMUNITY ASSOCIATION, INC.



Principal Place of Business

Mailing Address

% CONDOMINIUM MANAGEMENT INC.
1801 GLENGARY ST.
SARASOTA FL 34231-3603

% CONDOMINIUM MANAGEMENT INC.
1801 GLENGARY ST.
SARASOTA FL 34231-3603

94021400



2. Principal Place of Business

3. Mailing Address

THE SANCTUARY COMMUNITY ASSOCIATION

537 SANCTUARY DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

537 SANCTUARY DRIVE

LONGBOAT KEY, FLA.

City & State

City & State

LONGBOAT KEY, FLA.

LONGBOAT KEY, FLA.

Zip

Country

Zip

Country

34228

SARASOTA

34228

SARASOTA

MOORE

CR2E037 (11/03)

4. FEI Number

65-0155876

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

% CONDOMINIUM MANAGEMENT, INC.
1801 GLENGARY ST.
SARASOTA FL 34231-3603

NICK LLOYD
Box Number is Not Acceptable
537 SANCTUARY DRIVE.

Client

SNQ LONGBOAT KEY, FLA.

City

FL

Zip Code

34228

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.

Account #

Amount

7500

\$61.25

SIGNATURE

Nick Lloyd

Verified By

Nick Lloyd

02-10-04

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

(NOTE: Registered Agent Signature Required When Relinquishing)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE AS
NAME CLARK, RICHARD ☒ Delete
STREET ADDRESS 1801 GLENGARY ST.
CITY-ST-ZIP SARASOTA FL

TITLE STD ☐ Change ☒ Addition
NAME DR. JAMES THOMAS
STREET ADDRESS 535 SANCTUARY DRIVE APT B-705
CITY-ST-ZIP LONGBOAT KEY, FL. 34228

TITLE D ☒ Delete
NAME SIMON, LEWIS
STREET ADDRESS 565 SANCTUARY DR A-402
CITY-ST-ZIP LONGBOAT KEY FL 34228

TITLE D ☐ Change ☒ Addition
NAME Gerp Yonover
STREET ADDRESS 565 SANCTUARY DRIVE APT. A-301
CITY-ST-ZIP LONGBOAT KEY, FLA. 34228.

TITLE D ☐ Delete
NAME HOROWITZ, CAROL
STREET ADDRESS 545 SANCTUARY DR A-203
CITY-ST-ZIP LONGBOAT KEY FL 34228

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME HOWARD SIEGEL
STREET ADDRESS 565 SANCTUARY DR #A-302
CITY-ST-ZIP LONGBOAT KEY FL 34228

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PD ☒ Delete
NAME BRADY, JERRY
STREET ADDRESS 535 SANCTUARY DR C-607
CITY-ST-ZIP LONGBOAT KEY FL 34228

TITLE PD ☐ Change ☒ Addition
NAME Lester Levine
STREET ADDRESS 545 SANCTUARY DRIVE PHA
CITY-ST-ZIP LONGBOAT KEY, FL. 34228

TITLE D ☐ Delete
NAME Arthur Harrel
STREET ADDRESS 535 SANCTUARY DRIVE C-608
CITY-ST-ZIP LONGBOAT KEY, FLA. 34228

TITLE D ☐ Change ☐ Addition
NAME ROBERT BERNARD
STREET ADDRESS 575 SANCTUARY DRIVE A-304
CITY-ST-ZIP LONGBOAT KEY, FL. 34228

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:

Nick Lloyd
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Nick LLOYD

02-10-04 941-383-6021

Date

Daytime Phone #