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**Secretary of State**
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NONPROFIT CORPORATION ANNUAL REPORT
**1999**

FLORIDA DEPARTMENT OF STATE
**Katherine Harris**
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N47930**

1. Corporation Name

L'AMBIANCE AT LONGBOAT KEY CLUB CONDOMINIUM ASSOCIATION, INC.

* 82933 90064 42 *

| Principal Place of Business | Mailing Address |
|---|---|
| 415 L'AMBIANCE DR<br>LONGBOAT KEY FL 34228<br>US | ~~8174 GULF MEXICO DR~~<br>LONGBOAT KEY FL 34228<br>US |

| | | |
|---|---|---|
| 2. Principal Place of Business<br>21<br>Suite, Apt. #, etc.<br>22<br>City & State<br>23<br>Zip / Country<br>24 25 | 2a. Mailing Address<br>26 415 L'Ambiance Drive<br>Suite, Apt. #, etc.<br>27<br>City & State<br>28 Longboat Key, FL<br>Zip / Country<br>29 34228 30 USA | 3. Date Incorporated or Qualifed<br>03/18/1992<br>4. FEI Number<br>65-0330478 ☐ Applied For ☐ Not Applicable<br>5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required<br>6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees |

9. Name and Address of Current Registered Agent

CALLANS, BETH
415 LAMBIANCE DR
LONGBOAT KEY FL 34228

10. Name and Address of New Registered Agent

81 Name: Rochelle Pinsenell
82 Street Address (P.O. Box Number is Not Acceptable): 415 L'Ambiance Dr.
83 City: Longboat Key FL 85 Zip Code: 34228

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: Rochelle S. Pinsenell DATE: 1-31-99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | ☐ DELETE | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | ☐ Change ☐ Addition |
|---|---|---|---|---|---|
| TITLE | P | | 1.1 TITLE | | |
| NAME | PHILLIPS, HOWARD | | 1.2 NAME | | |
| STREET ADDRESS | 435 LAMBRANCE DR #K706 | | 1.3 STREET ADDRESS | | |
| CITY-ST-ZIP | LONGBOAT KEY FL | | 1.4 CITY-ST-ZIP | | |
| TITLE | VP | | 2.1 TITLE | | |
| NAME | LOEFFLER, CHERYL | | 2.2 NAME | | |
| STREET ADDRESS | 415 L AMBIANCE DR C203 | | 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | LONGBOAT KEY FL | | 2.4 CITY-ST-ZIP | | |
| TITLE | T | | 3.1 TITLE | | |
| NAME | LILL, ED | | 3.2 NAME | | |
| STREET ADDRESS | 415 LAMBIANCE DR C404 | | 3.3 STREET ADDRESS | | |
| CITY-ST-ZIP | LONGBOAT KEY FL | | 3.4 CITY-ST-ZIP | | |
| TITLE | D | | 4.1 TITLE | | |
| NAME | TATE, ROBERT | | 4.2 NAME | | |
| STREET ADDRESS | 415 LAMBIANCE DR F608 | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | LONGBOAT KEY FL | | 4.4 CITY-ST-ZIP | | |
| TITLE | D | | 5.1 TITLE | | |
| NAME | MUELLER, RUDY | | 5.2 NAME | | |
| STREET ADDRESS | 415 LAMBIANCE DR C703 | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP | LONGBOAT KEY FL | | 5.4 CITY-ST-ZIP | | |
| TITLE | VDP | | 6.1 TITLE | | |
| NAME | SIEGLER, MORTON | | 6.2 NAME | | |
| STREET ADDRESS | 435 L AMBIANCE DR M608 | | 6.3 STREET ADDRESS | | |
| CITY-ST-ZIP | LONGBOAT KEY FL | | 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:** SIGNED Treasurer 2/3/99 941-383-7200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)