
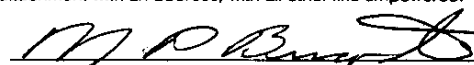


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 14, 2005 8:00 am**  
**Secretary of State**

03-14-2005 90083 016 \*\*\*\*61.25

<b>DOCUMENT # N98000000499</b> 1. Entity Name <b>SHORES OF LONG BAYOU IV CONDOMINIUM ASSOCIATION, INC.</b>					
Principal Place of Business <b>6399 SHORELINE DR ST. PETERSBURG, FL 33708</b>			Mailing Address <b>6399 SHORELINE DR ST. PETERSBURG, FL 33708</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>59-3501544</b>	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>BENGSTON, N.P. 6399 SHORELINE DR. #4303 ST. PETERSBURG, FL 33708</b>			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>		
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.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> 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	DP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>BENGSTON, N.P.</b>		NAME		
STREET ADDRESS	<b>6399 SHORELINE DR #4303</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>ST. PETERSBURG, FL 33708</b>		CITY-ST-ZIP		
TITLE	DV	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>GILDEA, JANE</b>		NAME		
STREET ADDRESS	<b>6399 SHORELINE DR, #4101</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>ST. PETERSBURG, FL 33708</b>		CITY-ST-ZIP		
TITLE	DST	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>SANGUINETT, JOHN</b>		NAME		
STREET ADDRESS	<b>6399 SHORELINE DR, #4301</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>ST. PETERSBURG, FL 33708</b>		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			NAME	<b>DV SHARON WALL</b>	
STREET ADDRESS			STREET ADDRESS	<b>6399 SHORELINE DR. #4206</b>	
CITY-ST-ZIP			CITY-ST-ZIP	<b>St. Petersburg, FL 33708</b>	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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.					
<b>SIGNATURE:</b> 			<b>N.P. BENGSTON</b>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date</small> <b>3/9/05</b>		
			<small>Daytime Phone #</small> <b>727-392-1487</b>		