FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 13 AM 11:16

DOCUMENT # 719214 (9)

1. Corporation Name
ISLANDER CLUB OF LONGBOAT CONDOMINIUM ASSOCIATIO N, INC.

Principal Place of Business	Mailing Address
2295 GULF OF MEXICO DRIVE LONGBOAT KEY FL 34228-3220	2295 GULF OF MEXICO DRIVE LONGBOAT KEY FL 34228-3220

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/31/1970
3a. Date of Last Report: 03/29/1994
4. FEI Number: 59-1361839 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business 21	2a. Mailing Address 26	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
City & State 23	City & State 28	7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	$68.75 Supplemental Fee Not Required
Zip 24 / Country 25	Zip 29 / Country 30	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

SMITH, W.R.
2301 GULF OF MEXICO DR
LONGBOAT KEY FL 34228

10. Name and Address of New Registered Agent

81 Name: PETER FISCHER
82 Street Address (P.O. Box Number is Not Acceptable): 2295 GULF OF MEXICO DRIVE
83
84 City: LONGBOAT KEY FL 85 Zip Code: 34228

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Peter T Fischer MANAGER — 3/6/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	☐ Change ☐ Addition
NAME	MAZEAU, RICHARD	1.2 NAME	
STREET ADDRESS	2301 GULF OF MEXICO DR.	1.3 STREET ADDRESS	
CITY-ST-ZIP	LONGBOAT KEY, FL 00000	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	☐ Change ☐ Addition
NAME	SUNA, PHILLIP	2.2 NAME	
STREET ADDRESS	2301 GULF OF MEXICO DR.	2.3 STREET ADDRESS	
CITY-ST-ZIP	LONGBOAT KEY, FL 00000	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	☐ Change ☐ Addition
NAME	KANNER, RICHARD	3.2 NAME	
STREET ADDRESS	2301 GULF OF MEXICO DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	LONGBOAT KEY, FL 00000	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	☐ Change ☐ Addition
NAME	AGELOFF, LESTER	4.2 NAME	
STREET ADDRESS	2301 GULF OF MEXICO DR.	4.3 STREET ADDRESS	
CITY-ST-ZIP	LONGBOAT KEY, FL 00000	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	STELLING, OLIVE	5.2 NAME	
STREET ADDRESS	2301 GULF OF MEXICO DR.	5.3 STREET ADDRESS	
CITY-ST-ZIP	LONGBOAT KEY, FL 00000	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	ROSS, BERNIE	6.2 NAME	
STREET ADDRESS	2301 GULF OF MEXICO DR.	6.3 STREET ADDRESS	
CITY-ST-ZIP	LONGBOAT KEY, FL 00000	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: ✓ Clayton LOBSTER AGELOFF, TREAS FEB 18 1995 383-6164
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0003080