

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723799

Entity Name: CLUB LONGBOAT BEACH AND TENNIS CONDOMINIUM ASSOCIATION, INC.

FILED
Apr 06, 2022
Secretary of State
7423116479CC

Current Principal Place of Business:

5055 GULF OF MEXICO DR
LONGBOAT KEY, FL 34228

Current Mailing Address:

C/O ASSOCIA GULF COAST
9887 4TH ST N SUITE 301
SAINT PETERSBURG, FL 33702 US

FEI Number: 59-1431423

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASSOCIA GULF COAST
9887 4TH STREET NORTH
SUITE 301
SAINT PETERSBURG, FL 33702 US

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: JOHN HENSLEY

04/06/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name DIGANI, JERRY
Address C/O ASSOCIA GULF COAST
 9887 4TH ST N SUITE 301
City-State-Zip: SAINT PETERSBURG FL 33702

Title DIRECTOR
Name LEWIN, DON
Address C/O ASSOCIA GULF COAST
 9887 4TH ST N SUITE 301
City-State-Zip: SAINT PETERSBURG FL 33702

Title VP
Name KERNS, SHAWN
Address C/O ASSOCIA GULF COAST
 9887 4TH ST N SUITE 301
City-State-Zip: SAINT PETERSBURG FL 33702

Title DIRECTOR
Name MUSKOVITZ, MELVIN
Address C/O ASSOCIA GULF COAST
 9887 4TH ST N SUITE 301
City-State-Zip: SAINT PETERSBURG FL 33702

Title SECRETARY
Name RILEY, JONATHAN
Address C/O ASSOCIA GULF COAST
 9887 4TH ST N SUITE 301
City-State-Zip: SAINT PETERSBURG FL 33702

Title TREASURER
Name JUDSON, HUNTER R
Address C/O ASSOCIA GULFCOAST
 9887 4TH STREET N. SUITE 301
City-State-Zip: SAINT PETERSBURG FL 33702

Title DIRECTOR
Name DALY, JOHN
Address C/O ASSOCIA GULF COAST
 9887 4TH ST N SUITE 301
City-State-Zip: SAINT PETERSBURG FL 33702

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: HUNTER R JUDSON

TREASURER

04/06/2022

Electronic Signature of Signing Officer/Director Detail

Date