

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 727128

**Entity Name:** LONGBOAT BEACH HOUSE CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Feb 08, 2017**  
**Secretary of State**  
**CC1016782435**

**Current Principal Place of Business:**

4134 GULF OF MEXICO DRIVE #203  
LONGBOAT KEY, FL 34228

**Current Mailing Address:**

4134 GULF OF MEXICO DRIVE #203  
LONGBOAT KEY, FL 34228 US

**FEI Number:** 59-1839134

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BEA, VITA  
4134 GULF OF MEXICO DRIVE #203  
LONGBOAT KEY, FL 34228 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:** VITA BEA

**02/08/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name GOODFRIEND, BRIAN  
Address 4134 GULF OF MEXICO DRIVE #203  
City-State-Zip: LONGBOAT KEY FL 34228

Title SECRETARY/TREASURER  
Name BERMAN, MICHAEL  
Address 4134 GULF OF MEXICO DRIVE #203  
City-State-Zip: LONGBOAT KEY FL 34228

Title DIRECTOR  
Name PELTON, DICK  
Address 4134 GULF OF MEXICO DRIVE #203  
City-State-Zip: LONGBOAT KEY FL 34228

Title PRESIDENT  
Name BEA, VITA  
Address 4134 GULF OF MEXICO DRIVE #203  
City-State-Zip: LONGBOAT KEY FL 34228

Title DIRECTOR  
Name DECKER, MICHAEL  
Address 4134 GULF OF MEXICO DR. #203  
City-State-Zip: LONGBOAT KEY FL 34228

*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:** VITA BEA

**PRESIDENT**

**02/08/2017**

Electronic Signature of Signing Officer/Director Detail

Date