SIGNATURE:	JOHN HENSLEY			04/27/2019
	Electronic Signature of Registered Agent			Date
Officer/Dired	ctor Detail :			
Title	PRESIDENT	Title	VP	
Name	BAYSDEN, RON	Name	BROWN, ZANE	
Address	C/O ASSOCIA GULF COAST 13461 PARKER COMMONS BLVD STE 101	Address	C/O ASSOCIA GULF COAST 13461 PARKER COMMONS BLVI 101	O STE
City-State-Zip:	FORT MYERS FL 33912	City-State-Zip:	FORT MYERS FL 33912	
Title	TREASURER	Title	SECRETARY	
Name	BASTIAN, ANTHONY	Name	SPANG, ANN	
Address	C/O ASSOCIA GULF COAST 13461 PARKER COMMONS BLVD STE 101	Address	C/O ASSOCIA GULF COAST 13461 PARKER COMMONS BLVI 101	O STE
City-State-Zip:	FORT MYERS FL 33912	City-State-Zip:	FORT MYERS FL 33912	
Title	DIRECTOR			
Name	NAIFEH, JOHN			
Address	C/O ASSOCIA GULF COAST 13461 PARKER COMMONS BLVD STE 101			
City-State-Zip:	FORT MYERS FL 33912			

C/O ASSOCIA GULF COAST 13461 PARKER COMMONS BLVD STE 101 FORT MYERS, FL 33912 US

**Current Principal Place of Business:** 13461 PARKER COMMONS BLVD STE 101

## FEI Number: 59-1880456

**Current Mailing Address:** 

**DOCUMENT# 745169** 

FORT MYERS. FL 33912

## Name and Address of Current Registered Agent:

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: LONGBOAT VILLAGE CONDOMINIUM ASSOCIATION, INC.

ASSOCIA GULF COAST 13461 PARKER COMMONS BLVD STE 101 FORT MYERS, FL 33912 US

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: RON BAYSDEN

PRESIDENT

04/27/2019

Electronic Signature of Signing Officer/Director Detail

## FILED Apr 27, 2019 Secretary of State 3853786060CC

Certificate of Status Desired: No