

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N31994

**FILED**  
**Mar 15, 2019**  
**Secretary of State**  
**4061780412CC**

**Entity Name:** SANCTUARY IV AT LONGBOAT KEY CLUB CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

537 SANCTUARY DR  
LONGBOAT KEY, FL 34228

**Current Mailing Address:**

537 SANCTUARY DR  
LONGBOAT KEY, FL 34228 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

SANCTUARY IV AT LONGBOAT KEY CLUB CONDOMINIUM ASSOCIATION, INC.  
537 SANCTUARY DR  
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: CONNIE LANG AS AGENT FOR SN4 BOD**

**03/15/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name ELFSTRUM, JIM  
Address 537 SANCTUARY DR  
City-State-Zip: LONGBOAT KEY FL 34228

Title VPD  
Name FRANKEL, HERMAN  
Address 537 SANCTUARY DR  
City-State-Zip: LONGBOAT KEY FL 34228

Title TD  
Name RUPP, MARK  
Address 537 SANCTUARY DR  
City-State-Zip: LONGBOAT KEY FL 34228

Title PD  
Name KILLALY, PAT  
Address 537 SANCTUARY DR  
City-State-Zip: LONGBOAT KEY FL 34228

Title D  
Name LENOBEL, JEFF  
Address 537 SANCTUARY DR  
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: PAT KILLALY**

**PRESIDENT**

**03/15/2019**

Electronic Signature of Signing Officer/Director Detail

Date