

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000004439

**Entity Name:** SHORES OF LONG BAYOU V CONDOMINIUM ASSOCIATION, INC.**FILED**  
**Feb 25, 2020**  
**Secretary of State**  
**4676233573CC****Current Principal Place of Business:**6475 SHORELINE DRIVE  
ST PETERSBURG, FL 33708**Current Mailing Address:**901 NORTH HERCULES AVE.  
SUITE A  
CLEARWATER, FL 33765 US**FEI Number:** 65-0889454**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JANOFSKY, SAMUEL  
901 NORTH HERCULES AVE.  
SUITE A  
CLEARWATER, FL 33765 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:** SAMUEL JANOFSKY**02/25/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	VP
Name	JANOFSKY, SAMUEL
Address	6475 SHORELINE DR. #5303
City-State-Zip:	SAINT PETERSBURG FL 33708

Title	PRESIDENT
Name	GUSTAFSON, MARY
Address	6475 SHORELINE DR. #5201
City-State-Zip:	ST. PETERSBURG FL 33708

Title	SECRETARY
Name	HANULIK, ALBERT
Address	6 COLUMBUS COURT
City-State-Zip:	PALM COURT FL 32137

Title	TREASURER
Name	O'MALLEY, SUDONNA L
Address	6475 SHORELINE DR. #5104
City-State-Zip:	ST. PETERSBURG FL 33708

Title	VP
Name	GATHRO, RICHARD
Address	6475 SHORELINE DR. #5406
City-State-Zip:	ST. PETERSBURG FL 33708

*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:** SUDONNA L O'MALLEY**TREASURER****02/25/2020**

Electronic Signature of Signing Officer/Director Detail

Date