

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2006 8:00 am
Secretary of State

04-14-2006 90153 020 ****61.25

DOCUMENT # 718008

1. Entity Name
LONGBOAT HARBOUR TOWERS CONDOMINIUM, INC.



Principal Place of Business
**4401 GULF OF MEXICO DR.
LONGBOAT KEY, FL 34228**

Mailing Address
**4401 GULF OF MEXICO DR.
LONGBOAT KEY, FL 34228**

50012322



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03152006

Chg-NP

CR2E037 (11/05)

City & State

City & State

4. FEI Number
59-1310648

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HEROLD, WILLIAM M. JR.
5500 MARINA DR.
HOLMES BCH., FL 33510**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SCHEDLER, MIKE
4401 GULF OF MEXICO DRIVE #302
LONGBOAT KEY, FL 34228** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
VINCENT, IRENE
4401 GULF OF MEXICO DR #1002
LONGBOAT KEY, FL 34228** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DT
MCGAUGHY, LARRY
4401-GULF OF MEXICO DR. #602
LONGBOAT KEY, FL 34228** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ROEHLING, JERALD
4401 GULF OF MEXICO DR. #402
LONGBOAT KEY, FL 34228** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ROEHLING, JERALD
4401 GULF OF MEXICO DRIVE #402
LONGBOAT KEY, FL 34228** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
LIBA, PETER
4401 GULF OF MEXICO DR. #301
LONGBOAT KEY, FL 34228** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
DAILEY, EDWARD
4401 GULF MEXICO DR #906
LONGBOAT KEY, FL 34228** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
MANGUS, JIMMIE
4401 GULF OF MEXICO DR. #601
LONGBOAT KEY, FL 34228** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
LIDA, PETER
4401 GULF OF MEXICO DR #301
LONGBOAT KEY, FL 34228** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Jimmie L. MANCUS 4/12/06