2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 20, 2004 8:00 am Secretary of State

DOCUMENT # 725605 1. Entity Name LONGBEACH CONDOMINIUM ASSOCIATION, INC.					O.	2-20-2004 9	90002 046 **	**61.25
Principal Place of Business 7075 GULF OF MEXICO DRIVE LONGBOAT KEY, FL 34228-1109 Address 7075 GULF OF MEXICO DRIVE LONGBOAT KEY, FL 34228-1109)				
2. Principal Place of Business 3. N		3. Mailing Address	Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02022004 Chg	J-NP	CR2E037 (10/0	3)	
City & State		City & State		4. FEI Number 59-1543431			Applied For Not Applicable	
Zip	Country	Zip	Country	Ŷ	5. Certificate of Status Desired S8.75 Additional Fee Required			
	6. Name and Address of Current R	legistered Agent	1		7. Name and Addre	ss of New Reg	·	
MELLO IX		بالمهجين المهيان	· > V	Name "				
WELLS, KEVIN T ESQ 2033 MAIN STREET			S	Street Address (P.O. Box Number is Not Acceptable)				
SUITE 403	A, FL 34237		-					
				City			FL Zip (Code
8. The above	named entity submits this statement for	the purpose of changing its	registered o	office or registe	red agent, or both, in th	e State of Florid		ith, and accept
the obligat	tions of registered agent.							
SIGNATURE :								
	Signature, typed or printed name of registered agent ar	nd title if applicable. (NOT	E: Registered Ag	gent signature required	d when reinstating)		DATE	
	Signature, typed or printed name of registered agent at Filling Fee is \$61.25 Due by May 1, 2004	9. Election Car		ancing	\$5.00 May Be Added to Fees		DATE ke check payabla a Department o	
10.	Filing Fee is \$61.25 Due by May 1, 2004 OFFICERS AND DIR	9. Election Car Trust Fund	mpaign Fina	ancing	\$5.00 May Be	Florid	ke check payab la Department o	f State S IN 10
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indicated on this report or supplier entail report is true and accurate and that my signature shall have the same legal effect as if made under or oth; 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:

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/11/04

941-383-5454

Daytime Phone #