2008 NOT-FOR-PROFIT CORPORATION

FILED May 01, 2008 8:00 am Secretary of State

2000	
-4*	ANNUAL REPORT
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DOCUMENT #727128 1. Entity Name LONGBOAT BEACH HOUSE CONDOMINIUM ASSOCIATION, INC.							05-01-2008 90224 002 ****61.25						
Principal Place of Business 5041 RINGWOOD MEADOW SUITE 2 SARASOTA, FL 34235			5041 Suiti	Mailing Address 5041 RINGWOOD MEADOW SUITE 2 SARASOTA, FL 34235									
2. Principal Place of Business - No P.O. Box #		3. Mai	3. Mailing Address										
Suite, Apt. #, etc.			Su	Suite, Apt. #, etc.			011820	01182008 Chg-NP CR2E037 (12/06)					
City & State			Cit	City & State			4. FEI Number 59-183913					opplied For lot Applicable	
Zip	Country		Ziç	Zip Co		intry	5. Certif	icate of S	tatus Desired		\$8.75 Ad Fee Requir		
	6. Name	and Address of Current	Registere	d Agent		Name	7. Name	and Add	iress of New	Registered	Agent		
PAMI MAN													
5041 RING SUITE 2						Street Address (P.O. Box Number is Not Acceptable)							
SARASOTA, FL 34235													
						City				F			
	named entiti ions of regist	ty submits this statement fo tered agent,	or the purp	ose of changing its r	egister	ed office or regis	stered agent, o	of both, in	the State of I	Horida, lan	n familiar with	n, and accept	
SIGNATURE .	Stroeture typed	or printed name of registered agent	and title 4 acc	Icable (NOTE:	Receivere	d Agent signeture requ	ered when remaining	no)		DATE			
	Ogradot, typed	or principle of logistic to again	WHO 1000 H 0030				on co when to round		1				
Filing Fee is \$61.25 Due by May 1, 2008				Election Campaign Financing Trust Fund Contribution.			\$5.00 N Added to 1	Aay Be Fees			ck payable artment of S		
10.	D	OFFICERS AND DI	RECTORS	Поль	11.	- 1	ADDITIONS	S/CHANG	ES TO OFFIC	ERS AND D			
TITLE NAME	- State				NAM						☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	4311 GULF OF MEXICO DR. APT 601 STR					ET ADDRESS -ST-ZIP							
TITLE Name	TD Delete				TITL	1					☐ Change	☐ Addition	
STREET ADORESS						ET ADDRESS							
CITY-ST-ZIP	LONGBOAT KEY, FL 34228					-ST-ZiP			····				
TITLE NAME	SD Delete Tiffs]					☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP	! ■					-ST-ZIP							
TITLE					TITL	1				·	☐ Change	☐ Addition	
NAME STREET ADDRESS	SMIGIELSKI, MARY SS 4311 GULF OF MEXICO DR. #403			NAM STRE	ET ADORESS								
CITY-ST-ZIP					CITY	-ST-ZIP							
title Name	PD Delete DARRAS, JOHN			☐ Delete	TITL				•		☐ Change	☐ Addition	
STREET ADDRESS	4311 GULF OF MEXICO DR APT 304			STRE	ET ADDRESS								
CITY-ST-ZIP	LONGBO	OAT KEY, FL 34228			_	-ST-ZIP				·····	☐ Change	☐ Addition	
TITLE Name				☐ Delete	TITL!						LT change	Audiuon	
STREET ADDRESS CITY-ST-ZIP						EET ADORESS 7-ST-ZIP							
12. I hereby certify that the information supplied with this fitting 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 addyss, with all other like empowered.												er or director	
		activistic will all accuracy,	/)	EARAA			4-2	g _^	Q'			ľ	
SIGNAT	URE:	SIGNATURE AND TYPES ON	PRINTED NA	ALOU STORING OFFICER (OR DEREC	TOR	1 - X	0 0	Date:		Daytme Phone II	, 	