2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745901

FILED Jan 28, 2009 Secretary of State

Entity Name: TIDES OF LONGBOAT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5555 GULF OF MEXICO DR. LONGBOAT KEY, FL 34228

Current Mailing Address: New Mailing Address:

5500 MARINA DR 5500 MARINA DR SUITE 1 SUITE 1

HOLMES BEACH, FL 34217 HOLMES BEACH, FL 34217 US

FEI Number: 59-2004131 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HEROLD, WILLIAM M. JR. 5500 MARINA DR. HOLMES BEACH, FL 34217

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:

Electronic Signature of Registered Agent

US

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

WEBSTER, RICHARD WEBSTER, RICHARD Name: Name: 5555 GULF OF MEXICO DR. #101 Address: 5555 GULF OF MEXICO DR. #101 Address:

City-St-Zip: LONGBOAT KEY, FL 34228 City-St-Zip: LONGBOAT KEY, FL 34228 US

(X) Change () Addition Title: Title: () Delete Name: THOMAS, WILLIAM Name: THOMAS, WILLIAM

Address: 5555 GULF OF MEXICO #101 Address: 5555 GULF OF MEXICO #101 City-St-Zip: LONGBOAT KEY, FL City-St-Zip: LONGBOAT KEY, FL 34228 US

Title: () Delete Title: (X) Change () Addition FEULNER, ROGER Name: FEULNER, ROGER Name:

5555 GULF OF MEXICO DR #201 5555 GULF OF MEXICO DR #201 Address: Address:

City-St-Zip: LONGBOAT KEY, FL 34228 City-St-Zip: LONGBOAT KEY, FL 34228 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: RICHARD WEBSTER D 01/28/2009