## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 755728** 

FILED Jan 06, 2009 Secretary of State

Entity Name: GULF TIDES OF LONGBOAT KEY CONDOMINIUM ASSOCIATION, INC.

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

3008 GULF OF MEXICO DRIVE LONGBOAT KEY, FL 342282911

Current Mailing Address: New Mailing Address:

3008 GULF OF MEXICO DRIVE LONGBOAT KEY, FL 342282911

FEI Number: 59-2624187 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

CUNNINGHAM, SHARON 1030 SEASIDE DRIVE SARASOTA, FL 34242 US

**OFFICERS AND DIRECTORS:** 

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 Date

## Electronic elginatare el regioterea

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

MCENERNEY, STUART

4904 DUCK CREEK LANE

(X) Change ( ) Addition

 Title:
 P ( ) Delete
 Title:

 Name:
 FLEMING, WALTER
 Name:

 Address:
 720 TROPICAL PKWY
 Address:

 City-St-Zip:
 ORANGE PARK, FL 32073
 City-St-Z

City-St-Zip: ORANGE PARK, FL 32073

City-St-Zip: PONTA VEDRA BEACH, FL 32082

Title: S () Delete Title: VP (X) Change () Addition Name: KIRSCHER, ROBERT Name: DALY, JOAN

 Address:
 52957 OX TURTLE CIR
 Address:
 6035 WILSHIRE BLVD

 City-St-Zip:
 SARASOTA, FL 34232
 City-St-Zip:
 SARASOTA, FL 34238

Title: VP ( ) Delete Title: S (X) Change ( ) Addition Name: MCENERNEY, STUART Name: BETTENHAUSEN, KAY

Address: 1 TURTLE BACK TRAIL Address: P.O. BOX 92017
City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: LAKELAND, FL 33804

Title: T () Delete Title: T (X) Change () Addition

 Name:
 MILLER, STEVEN
 Name:
 NORRIS, WILLIAM

 Address:
 6320 WATERCREST WY
 Address:
 1171 RICHTER STREET

 City-St-Zip:
 BRADENTON, FL 34202
 City-St-Zip:
 PORT CHARLOTTE, FL 33952

Title: BM () Delete Title: BM (X) Change () Addition

 Name:
 DALY, JOAN
 Name:
 SMILEY, VYRON

 Address:
 6035 WILSHIRE BLVD
 Address:
 4508 ALIGAN WAY

 City-St-Zip:
 SARASOTA, FL 34238
 City-St-Zip:
 LEXINGTON, KY 40515

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: JULIA RENAE LANGEVIN MGR 01/06/2009