

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 09, 2004 8:00 am
Secretary of State

03-23-2004 90069 008 ****50.00

DOCUMENT # L99000009397

1. Entity Name
LONGBOAT/BAY HILL HOLDINGS LLC



Principal Place of Business

INN ON THE BEACH
LONGBOAT KEY CLUB, #4307, SANDS PT. RD.
LONGBOAT KEY, FL 34228

Mailing Address

HERBERT LOTMAN
250 GRAYS LANE
HAVERFORD, PA 19041

34003039



DO NOT WRITE IN THIS SPACE

03032004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number
52-2228400

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC.
526 EAST PARK AVENUE
TALLAHASSEE, FL 32301

**DO NOT WRITE
IN THIS SPACE**

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

Herb

3-8-04

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
LOTMAN, HERBERT
250 GRAYS LANE
HAVERFORD, PA 19041

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Herbert Lotman

4/5/04

610-668-6766

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #