

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 31 1998 8:00am
Secretary of State

DOCUMENT # **M94949**

(8)

1. Corporation Name

LONGBOAT KEY CORPORATION

Principal Place of Business

**1285 6TH AVENUE
21ST FLOOR
NEW YORK NY 10019
US**

Mailing Address

**1285 6TH AVENUE
21ST FLOOR
NEW YORK NY 10019
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/18/1988

4. FEI Number

13-3485909

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

**TRAWICK, HAMMERSLEY & VALENTINE, P.A.
2051 MAIN STREET
SUITE 102
SARASOTA FL 34237**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	FLANZER, LOUIS	
STREET ADDRESS	1285 6TH AVENUE, 21ST FLOOR	
CITY-ST-ZIP	NEW YORK NY	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	KAPLAN, ERIC	
STREET ADDRESS	1285 6TH AVENUE, 21ST FLOOR	
CITY-ST-ZIP	NEW YORK NY	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE:

[Signature]

7/13/98

(212) 641-5005

CR2E034 (5/98)

PAGE 2



Alpine Resources LLC

1285 Avenue of the Americas
New York NY 10019
212 641 5000
Fax 212 641 5005

July 23, 1998

Florida Department of State
Annual Reports Filings
Division of Corporations
409 East Gaines St.
Tallahassee, Florida 32399

Re: Longboat Key Corporation
Doc#: M94949
Year: 1998

Gentlemen/Madame:

Enclosed you will find the 1998 Profit Corporation Annual Report. I am sending a check for \$150 payable to "Department of State". This amount does not include the late filing fee of \$400. The second notice received July 14th was the only correspondence we received regarding the 1998 tax year.

Please ensure that the mailing address on file is as follows:

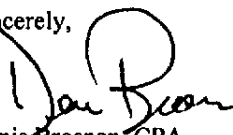
1285 6th Avenue
21st floor
New York, NY 10019

We respectfully request that the penalty be abated.

Kindly place your stamp, evidencing receipt of the enclosed, on the duplicate copy of this letter and return it to the above address.

Thank you for your anticipated help with this matter.

Sincerely,



Denis Brosnan, CPA