## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00913

FILED Feb 27, 2009 Secretary of State

Entity Name: THE BEACHES OF LONGBOAT KEY-SOUTH OWNERS ASSOCIATION, INC.

Current Principal Place of Business:			Nev	New Principal Place of Business:		
	BOAT CLUB RD ΓKEY, FL 34228	US				
Current Mailing Address:				New Mailing Address:		
	BOAT CLUB RD TKEY, FL 34228	US				
FEI Number:	59-2339223 FI	El 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:						
MOORE, ROBERT E 227 NOKOMIS AVE SOUTH VENICE, FL 34285 US						
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	
OFFICERS AND DIRECTORS:			AD	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () Dele BAINBRIDGE, JERR 775 LONGBOAT CLI LONGBOAT KEY, FL	Y JB RD, # 908			() Change () Addition	
Title: Name: Address: City-St-Zip:	RES ( ) Dele CUCCI, JOSEPH 775 LONGBOAT CLI LONGBOAT KEY, FI	JB RD,# 302			() Change () Addition	
Title: Name: Address: City-St-Zip:	TD ( ) Dele EPSTEIN, MARTIN 775 LONGBOAT CLI LONGBOAT KEY, FI	JB RD 704			( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) Dele FLEISCHER, FRANK 775 LONGBOAT CLI LONGBOAT KEY, FL	( JB RD			() Change () Addition	
Title: Name: Address: City-St-Zip:	DVPS ( ) Dele SEMISCH, DONALD 775 LONGBOAT CLI LONGBOAT KEY, FL	JB RD #604			( ) Change ( ) Addition	

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: DONALD SEMISCH DVPS 02/27/2009