

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009218

FILED
Feb 27, 2006
Secretary of State

Entity Name: LONGBOAT KEY TURTLE WATCH, INC.

Current Principal Place of Business:

713 NORTON STREET
LONGBOAT KEY, FL 34228

New Principal Place of Business:

Current Mailing Address:

PO BOX 72
LONGBOAT KEY, FL 34228

New Mailing Address:

FEI Number: 65-0227234

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOYNTON, SALLY
713 NORTON STREET
LONGBOAT KEY, FL 34228 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: BOYNTON, SALLY
Address: 713 NORTON STREET
City-St-Zip: LONGBOAT KEY, FL 34228

Title: SD () Delete
Name: TREONIS, NATHALIE
Address: 761 TARAWIT DR.
City-St-Zip: LONGBOAT KEY, FL 34228

Title: TD () Delete
Name: PERROTTA, FREDA
Address: 5757 GULF OF MEXICO DR.
City-St-Zip: LONGBOAT KEY, FL 34228

Title: VD () Delete
Name: SIEKMANN, MIMI
Address: 660 LANDS END
City-St-Zip: LONGBOAT KEY, FL 34228

Title: SD () Delete
Name: WILLIAMS, JUDITH
Address: 560 LYONS LANE
City-St-Zip: LONGBOAT KEY, FL 34228

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JUDITH WILLIAMS

SD

02/27/2006

Electronic Signature of Signing Officer or Director

Date