

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007002

FILED
Mar 01, 2006
Secretary of State

Entity Name: LONG POINT DOCK ASSOCIATION, INC.

Current Principal Place of Business:

167 LONG POINT DRIVE
AMELIA ISLAND,, FL 32034

New Principal Place of Business:

Current Mailing Address:

167 LONG POINT DRIVE
AMELIA ISLAND,, FL 32034

New Mailing Address:

144 LONG POINT DRIVE
AMELIA ISLAND,, FL 32034

FEI Number: 20-0552957

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARTMAN, FREDERICK D
167 LONG POINT DRIVE
AMELIA ISLAND, FL 32034 US

Name and Address of New Registered Agent:

HARTMAN, FREDERICK D
144 LONG POINT DRIVE
AMELIA ISLAND, FL 32034 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: SHARON M. ROWAN

03/01/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HARTMAN, FREDERICK D
Address: 167 LONG POINT DRIVE
City-St-Zip: AMELIA ISLAND, FL 32034

Title: VP () Delete
Name: DOWNEN, THOMAS W
Address: 167 LONG POINT DRIVE
City-St-Zip: AMELIA ISLAND, FL 32034

Title: SECT () Delete
Name: ROWAN, SHARON
Address: 144 LONG POINT DRIVE
City-St-Zip: AMELIA ISLAND, FL 32034

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:

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: SHARON M. ROWAN

SECT

03/01/2006

Electronic Signature of Signing Officer or Director

Date