


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2008 8:00 am
Secretary of State

03-05-2008 90031 035 ****70.00

DOCUMENT # N10053			
1. Entity Name LONG POND LANDING PROPERTY OWNERS' ASSOCIATION, INC.			
Principal Place of Business P.O. BOX 321 CHIEFLAND, FL 32626 US		Mailing Address P.O. BOX 321 CHIEFLAND, FL 32626 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
8. Name and Address of Current Registered Agent BOHAN, JOHN J 5351 NW 88TH STREET CHIEFLAND, FL 32626		7. Name and Address of New Registered Agent Name: <u>DUEHRING JANE</u> Street Address (P.O. Box Number is Not Acceptable): <u>8650 NW 52 AVE</u> City: <u>CHIEFLAND</u> FL Zip Code: <u>32626</u>	
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: <u>J.M. [Signature]</u> <small>Signature, typed or printed name of registered agent and date if applicable</small>		TREASURER: <u>[Signature]</u> 01/31/08 <small>(NOTE: Registered Agent signature required when rechartering) DATE</small>	
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BOHAN, JOHN 5351 NW 88TH CT CHIEFLAND, FL 32626 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM BOHAN JOHN 5351 NW 88th ST CHIEFLAND FL 32626 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD RODEN, DAVID 8850 NW 51ST CT CHIEFLAND, FL 32626 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO DAN MOLL 8851 NW 50th AVE CHIEFLAND AL 32626 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SCHREPPPEL, CATHERINE 5351 N.W. 88TH ST CHIEFLAND, FL 32626 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MARGARET MOLL 8851 NW 50th AVE CHIEFLAND FL 32626 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DUEHRING, JANE 8650 NW 52 AVE CHIEFLAND, FL 32626 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BOHAN, JOHN 5351 NW 88TH ST. CHIEFLAND, FL 32626 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM SMITH, BILL 5850 NW 88TH ST CHIEFLAND, FL 32626 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>J.M. [Signature]</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		01/31/08 <small>Date</small> 352-493-2976 <small>Office Phone #</small>	

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01312008 Chg-NP CR2E037 (12/06)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required