

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Jul 12, 2007  
Secretary of State

DOCUMENT# N13170

Entity Name: LONGPOINT I CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

6700 OAK SHORE DR.  
UNIT 311  
PANAMA CITY, FL 32404 US

**New Principal Place of Business:**

429 S TYNDALL PARKWAY  
SUITE L  
PANAMA CITY, FL 32404 US

**Current Mailing Address:**

6700 OAK SHORE DR.  
UNIT 311  
PANAMA CITY, FL 32404 US

**New Mailing Address:**

429 S TYNDALL PARKWAY  
SUITE L  
PANAMA CITY, FL 32404 US

FEI Number: 59-2861942      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

SLOAN, TIMOTHY J  
427 MCKENZIE AVE  
PANAMA CITY, FL 32401 US

**Name and Address of New Registered Agent:**

MOORE, MELANIE  
5802 BAY FRONT DRIVE  
PANAMA CITY, FL 32404 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: MELANIE MOORE

07/12/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VD ( ) Delete  
Name: VAN ASTON, CHRIS  
Address: 6700 OAK SHORE DR # 308  
City-St-Zip: PANAMA CITY, FL 32404

Title: VPD ( ) Delete  
Name: MOORE, MELANIE  
Address: 5802 BAY FRONT DR  
City-St-Zip: PANAMA CITY, FL 32404

Title: TD ( ) Delete  
Name: GODWIN, RALEIGH  
Address: 6700 OAK SHORE DRIVE #304  
City-St-Zip: PANAMA CITY, FL 32404

Title: D ( ) Delete  
Name: ROBINSON, ONWARD  
Address: 6700 OAKSHORE DR UNIT 310  
City-St-Zip: PANAMA CITY, FL 32404

Title: D ( ) Delete  
Name: GEORGE, LESTER  
Address: 6700 OAKSHORE DR #307  
City-St-Zip: PARKER, FL 32404

**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 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: MELANIE MOORE

VPD

07/12/2007

Electronic Signature of Signing Officer or Director

Date