

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13170

FILED  
Mar 01, 2011  
Secretary of State

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:

6700 OAKSHORE DRIVE  
UNIT 311  
PANAMA CITY, FL 32404 US

## Current Mailing Address:

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

## New Mailing Address:

6700 OAKSHORE DRIVE  
UNIT 311  
PANAMA CITY, FL 32404 US

FEI Number: 59-2861942

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

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

## Name and Address of New Registered Agent:

AUSTIN, MELANIE  
6700 OAKSHORE DRIVE  
UNIT 302  
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 AUSTIN

03/01/2011

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD  
Name: AUSTIN, MELANIE  
Address: 6700 OAKSHORE DRIVE #302  
City-St-Zip: PANAMA CITY, FL 32404

Title: VD  
Name: ROMINE, STAN  
Address: 6700 OAKSHORE DRIVE #101  
City-St-Zip: PANAMA CITY, FL 32404

Title: D  
Name: TIDWELL, RICHARD  
Address: 6700 OAKSHORE DRIVE #301  
City-St-Zip: PANAMA CITY, FL 32404

Title: D  
Name: GEORGE, LESTER  
Address: 6700 OAKSHORE DRIVE #307  
City-St-Zip: PANAMA CITY, FL 32404

Title: D  
Name: BOBER, ANA S  
Address: 6700 OAKSHORE DRIVE #103  
City-St-Zip: PANAMA CITY, FL 32404

Title: T  
Name: AUSTIN, MELANIE  
Address: 6700 OAKSHORE DRIVE #302  
City-St-Zip: PANAMA CITY, FL 32404

I hereby 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 all other like empowered.

SIGNATURE: MELANIE AUSTIN

PD

03/01/2011

Electronic Signature of Signing Officer or Director

Date