2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 23, 2007 8:00 am Secretary of State DOCUMENT # N27055 1. Entity Name 04-23-2007 90059 025 ****61.25 LONG COMMON CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 2004 LONGMEADOW 2004 LONGMEADOW SARASOTA FL 34235 SARASOTA FL 34235 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For 65-0070004 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name STOKES, REBECCA F Street Address (P.O. Box Number is Not Acceptable) 3053 51ST ST. SARASOTA FL 34234 City Zip Code FL 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 Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstaling) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Addition TITLE **ች**ኞች 11114 Secretary, Director Karen Runyon Change X-X Delete NAME ኊ፞፞፞፞፠፠፞፞፞፞ዾ፞ዾ፞*ኯ*፟ NAMI. STREET ADDRESS STREET ADDRESS £657 KONG COMMON 5650 E. Long Common Ct. CITY-ST-7IP CITY-ST-ZIP * SERVE HIT PRODUCED A Sarasota, FL 34235 TISE Delete TITLE Change Treasurer, Director CHURION DAY NAM NAME Bill Sauer STREET ADDRESS STREET ADDRESS 5715 Long Common CHY-ST-7IP CHY ST ZIP Sarasota, FL 34235 Delete TITLE TITLE ☐ Addition Director **□** Change NAME NAME COYNE, FRANK STREET ADDRESS STREET ADDRESS 5655 E. LONG COMMON CT. CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34235 Director, President ☐ Delete TITLE XX Change ☐ Addition D NAME NAME MURPHY, JOSEPH P. STREET ADDRESS STRUCT ADDRESS 4509 LONG COMMON CHY+ST-7IP CITY-ST-7/P SARASOTA FL 34235 TITLE Defete THLE ☐ Addition Director, Vice-Pres. **X X** hange NAME THOMAS, WILLIAM NAME STREET ADDRESS STREET ADDRESS 4492 LONG COMMON CITY-ST-7IP COV-ST-7IP SARASOTA FL 34235 TITLE Delete HILE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST- ZIP CITY-ST-7IP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes, I further certify that the information indicated on this report or supplemental report is frue and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee employered 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: ///

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR DIRECTOR DIRECTOR DIRECTOR