

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47930

FILED
Mar 23, 2009
Secretary of State

Entity Name: L'AMBIANCE AT LONGBOAT KEY CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

415 L'AMBIANCE DR
LONGBOAT KEY, FL 34228 US

New Principal Place of Business:

Current Mailing Address:

415 L'AMBIANCE DR
LONGBOAT KEY, FL 34228 US

New Mailing Address:

FEI Number: 65-0330478

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, BEVERLY
415 L'AMBIANCE DR.
LONGBOAT KEY, FL 34228 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PASTOR, IRWIN
Address: 435 L'AMBIANCE DR. D 405
City-St-Zip: LONGBOAT KEY, FL 34228

Title: VP () Delete
Name: PASINI, GEORGE
Address: 415 L'AMBIANCE DR., D-405
City-St-Zip: LONGBOAT KEY, FL 34228

Title: T () Delete
Name: LILL, ED
Address: 415 L'AMBIANCE DR C404
City-St-Zip: LONGBOAT KEY, FL

Title: D () Delete
Name: BLUMBERG, BOB
Address: 435 L'AMBIANCE DR
City-St-Zip: LONGBOAT KEY, FL 34228

Title: D () Delete
Name: CORTOS, CHARLES
Address: 435 L'AMBIANCE DR L307
City-St-Zip: LONGBOAT KEY, FL 34228

Title: P () Delete
Name: MERRIMAN, LARRY
Address: 415 L'AMBIANCE DR. F808
City-St-Zip: LONGBOAT KEY, FL 34228

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: PASTOR, IRWIN
Address: 435 L'AMBIANCE DR. D 405
City-St-Zip: LONGBOAT KEY, FL 34228

Title: D (X) Change () Addition
Name: FORS, MARC
Address: 415 L'AMBIANCE DR., D-906
City-St-Zip: LONGBOAT KEY, FL 34228

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: BLUMBERG, BOB
Address: 435 L'AMBIANCE DR
City-St-Zip: LONGBOAT KEY, FL 34228

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: LARRY MERRIMAN

P

03/23/2009

Electronic Signature of Signing Officer or Director

Date