

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Aug 31, 2006
Secretary of State**

DOCUMENT# N94000005684

Entity Name: LEMON BAY ESTATES ASSOCIATION, INC.

Current Principal Place of Business:8456 MIDNIGHT PASS RD.
SARASOTA, FL 34242**New Principal Place of Business:**4195 TAMIAMI TRAIL SOUTH
SUITE 164
VENICE, FL 34293**Current Mailing Address:**8456 MIDNIGHT PASS RD.
SARASOTA, FL 34242**New Mailing Address:**4195 TAMIAMI TRAIL SOUTH
SUITE 164
VENICE, FL 34293

FEI Number: 65-0603052

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:TOALE, JAMES
22 S. TUTTLE AVE., STE 3
SARASOTA, FL 34237 US**Name and Address of New Registered Agent:**CEMOVICH, ROBERT
2383 TAMIAMI TRAIL SOUTH
SUITE D
VENICE, FL 34293 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: ROBERT L. CEMOVICH

08/31/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: PD () Delete
Name: WEBER, CAROLYN E
Address: 8456 MIDNIGHT PASS RD.
City-St-Zip: SARASOTA, FL 34242Title: VD () Delete
Name: SMITH, A C
Address: 8456 MIDNIGHT PASS RD.
City-St-Zip: SARASOTA, FL 34242Title: STD () Delete
Name: MCDONALD, ELSIE M
Address: 2133 STRATFORD DR.
City-St-Zip: SARASOTA, FL 34232**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PTSD (X) Change () Addition
Name: GRASLAND, CLEMENT
Address: 4195 TAMIAMI TRAIL SOUTH, SUITE 164
City-St-Zip: VENICE, FL 34293Title: VD (X) Change () Addition
Name: SIMON, JULES
Address: 4195 TAMIAMI TRAIL SOUTH, SUITE 164
City-St-Zip: VENICE, FL 34293Title: D (X) Change () Addition
Name: HATTAIS, JOELLE
Address: 4195 TAMIAMI TRAIL SOUTH, SUITE 164
City-St-Zip: VENICE, FL 34293

I hereby certify that the information supplied with this filing does not qualify for the 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: CLEMENT GRASLAND

P

08/31/2006

Electronic Signature of Signing Officer or Director

Date