

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005529

FILED  
Apr 29, 2007  
Secretary of State

**Entity Name:** THE GOLF CONDOMINIUMS AT LONGPOND VILLAGE ASSOCIATION, INC.

**Current Principal Place of Business:**

7680 CAMBRIDGE MANOR PLACE  
SUITE 101  
FORT MYERS, FL 33907

**New Principal Place of Business:**

7228 EMILY DRIVE  
FORT MYERS, FL 33908

**Current Mailing Address:**

P.O. BOX 60195  
FORT MYERS, FL 33906

**New Mailing Address:**

P.O. BOX 08065  
FORT MYERS, FL 33908

FEI Number: 65-0780125

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CROKER, ANTHONY MR.  
7680 CAMBRIDGE MANOR PLACE  
SUITE 101  
FORT MYERS, FL 33907 US

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

SPRAGUE, JEAN MS.  
7228 EMILY DRIVE  
FORT MYERS, FL 33908 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: JEAN G. SPRAGUE

04/29/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: KEOUGH, CHARLES M MR.  
Address: 1499 RIVERS EDGE COURT, #203  
City-St-Zip: FORT MYERS, FL 33908

Title: STD ( ) Delete  
Name: RUFFINO, STEVEN MR.  
Address: 14999 RIVERS EDGE #103  
City-St-Zip: FORT MYERS, FL 33908

Title: VD ( ) Delete  
Name: TENGWALL, BENJAMIN MR.  
Address: 14971 RIVERS EDGE #203  
City-St-Zip: FORT MYERS, FL 33908

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: POHL, MICHAEL MR.  
Address: 14971 RIVERS EDGE COURT, #204  
City-St-Zip: FORT MYERS, FL 33908

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

Title: TD (X) Change ( ) Addition  
Name: SCHROEDER, HOWARD DR.  
Address: 14971 RIVERS EDGE #105  
City-St-Zip: FORT MYERS, FL 33908

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: JEAN G. SPRAGUE

CAM

04/29/2007

Electronic Signature of Signing Officer or Director

Date