

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000501

FILED
Mar 27, 2009
Secretary of State

Entity Name: THE SHORES OF LONG BAYOU HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

6301 SHORELINE DRIVE
ST. PETERSBURG, FL 33708

New Principal Place of Business:

Current Mailing Address:

6301 SHORELINE DRIVE
ST. PETERSBURG, FL 33708

New Mailing Address:

FEI Number: 59-3360036 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT CONCEPTS, INC.
4585 140TH AVE. NORTH SUITE 1012
CLEARWATER, FL 33762 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: SHERK, GLEN
Address: 6450 SHORELINE DR 9403
City-St-Zip: SAINT PETERSBURG, FL 33708

Title: P () Delete
Name: ANDERSON, JACK
Address: 6315 SHORELINE DR. #3205
City-St-Zip: SAINT PETERSBURG, FL 33708

Title: T () Delete
Name: LYONS, NANCY
Address: 6533 99TH WAY N, #19D
City-St-Zip: ST. PETERSBURG, FL 33708

Title: D () Delete
Name: RICHMOND, DEAN
Address: 6551 SHORELINE DRIVE 6305
City-St-Zip: SAINT PETERSBURG, FL 33708

Title: D () Delete
Name: WALL, SHERRY
Address: 6599 SHORELINE DR 4206
City-St-Zip: SAINT PETERSBURG, FL 33708

Title: D () Delete
Name: MANKIN, LARRY
Address: 6551 SHORELINE DR., #6302
City-St-Zip: SAINT PETERSBURG, FL 33708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: ROBERTS, WILLIAM
Address: 6550 SHORELINE DR. #7505
City-St-Zip: SAINT PETERSBURG, FL 33708

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

Title: VP (X) Change () Addition
Name: KAZARIAN, LEO
Address: 6425 SHORELINE DRIVE 10401
City-St-Zip: SAINT PETERSBURG, FL 33708

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

Title: S (X) Change () Addition
Name: MACFARLAND, JEAN
Address: 6330 99TH WAY N 14B
City-St-Zip: SAINT PETERSBURG, FL 33708

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: WILLIAM ROBERTS

P

03/27/2009

Electronic Signature of Signing Officer or Director

_____ Date