

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000501

**FILED**  
**Apr 15, 2010**  
**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:**

6301 SHORELINE DRIVE  
ST PETERSBURG, FL 33708

**Current Mailing Address:**

6301 SHORELINE DRIVE  
ST. PETERSBURG, FL 33708

**New Mailing Address:**

4585 140TH AVENUE N  
SUITE 1012  
CLEARWATER, FL 33762

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:**

COMMUNITY MANAGEMENT CONCEPTS, INC.  
4585 140TH AVENUE N  
SUITE 1012  
CLEARWATER, FL 33762 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: KIRK BLISS

04/15/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: SHERK, GLEN  
Address: 6450 SHORELINE DR 9403  
City-St-Zip: ST PETERSBURG, FL 33708

Title: PD  
Name: ROBERTS, WILLIAM  
Address: 6550 SHORELINE DR #7505  
City-St-Zip: ST PETERSBURG, FL 33708

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

Title: VP  
Name: KOREJWO, MERLE  
Address: 6575 99TH WAY N #22303  
City-St-Zip: ST PETERSBURG, FL 33708

Title: D  
Name: WALL, SHERRY  
Address: 6599 SHORELINE DR #4206  
City-St-Zip: ST PETERSBURG, FL 33708

Title: S  
Name: MACFARLAND, JEAN  
Address: 6330 99TH WAY N #14B  
City-St-Zip: ST PETERSBURG, FL 33708

I hereby 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 all other like empowered.

SIGNATURE: GLENN ODOM

MGR

04/15/2010

Electronic Signature of Signing Officer or Director

Date