2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2006
Secretary of State

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Entity Name: GULFSHORE OF LONGBOAT KEY, INC.

Current Principal Place of Business:

3710 GULF OF MEXICO DR
LONGBOAT KEY, FL 34228

New Principal Place of Business:

Current Mailing Address:

3710 GULF OF MEXICO DR
LONGBOAT KEY, FL 34228

New Mailing Address:

FEI Number: 65-0686091 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KORP, WILLIAM R
333 S TAMIAMI TRAIL SUITE 199
VENICE, FL 34285 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:	P	( ) Delete
Name:	WHITE, IRIS	
Address:	3710 GULF OF MEXICO DR	
City-St-Zip:	LONGBOAT KEY, FL 34228	
Title:	VP	( ) Delete
Name:	WIESE, CAROL	
Address:	3710 GULF OF MEXICO DR	
City-St-Zip:	LONGBOAT KEY, FL 34228	
Title:	D	( ) Delete
Name:	MACDUFF, CATHERINE	
Address:	3710 GULF OF MEXICO DR	
City-St-Zip:	LONGBOAT KEY, FL 34228	
Title:	D	( ) Delete
Name:	ERSTROM, PETER	
Address:	3710 GULF OF MEXICO DR F-1	
City-St-Zip:	LONGBOAT KEY, FL 34228	
Title:	D	( ) Delete
Name:	CARROLL, NEWTON	
Address:	3710 GULF OF MEXICO DR	
City-St-Zip:	LONGBOAT KEY, FL 34228	
Title:	T	( ) Delete
Name:	FREELAND, JERRY M	
Address:	3710 GULF OF MEXICO DR	
City-St-Zip:	LONGBOAT, FL 34228	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: IRIS WHITE PRES 01/25/2006

Electronic Signature of Signing Officer or Director — Date