




2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90254 037 ****61.25

DOCUMENT # N97000005317			
1. Entity Name LONG BAYOU ROAD ASSOCIATION, INC.			
Principal Place of Business 9777 62ND TERR. N. SAINT PETERSBURG, FL 33708		Mailing Address 9777 62ND TERR. N. SAINT PETERSBURG, FL 33708	
2. Principal Place of Business - No P.O. Box # 6301 Shoreline Dr		3. Mailing Address 6301 Shoreline Dr	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State St. Petersburg, FL		City & State Saint Petersburg, FL	
4. FEI Number 59-3521948		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
ROBERTS, WILLIAM R 9777 62ND TERR N SAINT PETERSBURG, FL 33708		Name William R Roberts, President	
		Street Address (P.O. Box Number is Not Acceptable) 6301 Shoreline Drive	
		City Saint Petersburg, FL	
		Zip Code 33708	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE 		DATE 2/28/07	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)	
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE SD	SHAHER, BILL <input checked="" type="checkbox"/> Delete	TITLE D Vice-President	Gaughan, Ed <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 10035 63RD AVE N BLDG 4-09	SAINT PETERSBURG, FL 33708	STREET ADDRESS 10034 64th Ave N. Bldg 3 - 018	SAINT PETERSBURG, FL 33708
TITLE D	GAUGHAN, ED <input checked="" type="checkbox"/> Delete	TITLE D Secretary	Dubois, Richard <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 10034 64TH AVE N BLDG 3-018	SAINT PETERSBURG, FL 33708	STREET ADDRESS 9860 62nd Avenue N.	St. Petersburg, FL 33708
TITLE D	BERNSTEIN, BOB <input checked="" type="checkbox"/> Delete	TITLE D Treasurer	Wall, Sharon <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 6533 99TH WAY N	SAINT PETERSBURG, FL 33708	STREET ADDRESS 6399 Shoreline Dr #4206	St. Petersburg, FL 33708
TITLE VD	POLGREEN, FRED <input checked="" type="checkbox"/> Delete	TITLE D	Sherk, Glen <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 9860 62ND TERRACE N #1025	SAINT PETERSBURG, FL 33708	STREET ADDRESS 6400 Shoreline Dr # 9403	St. Petersburg, FL 33708
TITLE P	COX, BILL <input checked="" type="checkbox"/> Delete	TITLE D	Shaffer, Bill <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 6301 SHORELINE DRIVE	SAINT PETERSBURG, FL 33708	STREET ADDRESS 10035 63rd Ave N Bldg 4-09	SAINT PETERSBURG, FL 33708
TITLE D	DIGIOIA, DOM <input type="checkbox"/> Delete	TITLE D President	William R Roberts <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 9806 62ND TERR N	SAINT PETERSBURG, FL 33708	STREET ADDRESS 6550 Shoreline Dr. # 7505	St. Petersburg, FL 33708
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		DATE 2/28/07	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	

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