

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004439

FILED  
Jan 20, 2012  
Secretary of State

**Entity Name:** SHORES OF LONG BAYOU V CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

6475 SHORELINE DRIVE  
ST. PETERSBURG, FL 33708

**New Principal Place of Business:**

4585 140TH AVE N  
CLEARWATER, FL 33762

**Current Mailing Address:**

6475 SHORELINE DRIVE  
5303  
ST. PETERSBURG, FL 33708

**New Mailing Address:**

4585 140TH AVE N  
1012  
CLEARWATER, FL 33762

**FEI Number:** 65-0889454

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JANOFSKY, SAMUEL  
6475 SHORELINE DRIVE  
5303  
ST. PETERSBURG, FL 33708 US

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

COMMUNITY MANAGEMENT CONCEPTS  
4585 140TH AVE N  
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

01/20/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: JANOFSKY, SAMUEL  
Address: 6475 SHORELINE DR. #5303  
City-St-Zip: SAINT PETERSBURG, FL 33708

Title: VP-1  
Name: O'LEARY, JANET  
Address: 6475 SHORELINE DR. #5106  
City-St-Zip: ST. PETERSBURG, FL 33708

Title: SD  
Name: JACOBY, JOHN  
Address: 6475 SHORELINE DR. #5101  
City-St-Zip: ST. PETERSBURG, FL 33708

Title: TD  
Name: O'MALLY, SUDONNA L  
Address: 6475 SHORELINE DR. #5104  
City-St-Zip: ST. PETERSBURG, FL 33708

Title: PPD  
Name: EHRBER, JOYCE  
Address: 6475 SHORELINE DR. #5201  
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

MNG

01/20/2012

Electronic Signature of Signing Officer or Director

Date