2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000055359

407 EVANS DR.

NICEVILLE, FL 32578

Address: City-St-Zip:

Entity Name: LONG POINT COVE YACHT CLUB INC

FILED Apr 30, 2005 Secretary of State

| _ | mer Londin | 51141 004E 17(0111 0E0B, 114) | <u>. </u> | | |
|---|--|----------------------------------|--|--|--|
| Current Principal Place of Business: | | | New Principal Place of Business: | | |
| 40001 EMI DESTIN, F | ERALD COAS FL 32541 | T PARKWAY | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| 40001 EMI DESTIN, F | ERALD COAS FL 32541 | T PARKWAY | | | |
| FEI Number | : 37-1430942 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address o | Name and Address of New Registered Agent: | |
| MATTHEV 4475 LEGI | VS, DANA C E VS & HAWKIN ENDARY DR. FL 32541 US | S PA | | | |
| | e named entity e of Florida. | submits this statement for the p | ourpose of changing its registered | d office or registered agent, or both, | |
| SIGNATU | RE: | | | | |
| | Electron | nic Signature of Registered Age | ent | Date | |
| Election Car | mpaign Financin | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | ADKINSON, CH 90 SPRIES LAI | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | VPTD (ADKINSON, W. 29874 US HWY FREEPORT, F | 7 331 SOUTH | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: | D (DEVARONA, E |) Delete NRIQUE J | Title: Name: | () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: CHAD ADKINSON P 04/30/2005