

2004 FOR PROFIT CORPORATION  
ANNUAL REPORT

FILED  
Feb 21, 2004 08:00 AM  
Secretary of State

DOCUMENT # P97000095847

1. Entity Name  
LONGBROOK CORPORATION



Principal Place of Business  
31 GREENWOOD AVE  
LEHIGH ACRES, FL 33936 US

Mailing Address  
31 GREENWOOD AVE  
LEHIGH ACRES, FL 33936 US

DO NOT WRITE IN THIS SPACE

8 F 5 3 , , , , 5 1 4 0 3 F &

02182004 No Chg-P CR2E034 (10/03)

4. FEI Number  
65-0794778

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

MUMMERT, BERNHARD  
31 GREENWOOD AVE  
LEHIGH ACRES, FL 33936

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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 Mummert 02/18/04  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00.

9. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be  
Added to Fees

U000000060479  
02/23/04-80040-021 150.00

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PDST  
LANGENBACH, KLAUS  
517 COLUMBUS AVE  
LEHIGH ACRES, FL 33936

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
V  
MUMMERT, BERNHARD  
31 GREENWOOD AVE  
LEHIGH ACRES, FL 33936

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
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NAME  
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CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 607, 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: Mummert 02/18/04 229-369-8217  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #