

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13170

**Entity Name:** LONGPOINT I CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Mar 28, 2016**  
**Secretary of State**  
**CC2690158670**

**Current Principal Place of Business:**

6700 OAKSHORE DRIVE  
UNIT 311  
PANAMA CITY, FL 32404

**Current Mailing Address:**

6700 OAKSHORE DRIVE  
UNIT 311  
PANAMA CITY, FL 32404 US

**FEI Number: 59-2861942**

**Certificate of Status Desired: No**

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

SALINAS, LINDA  
6700 OAKSHORE DRIVE  
UNIT 311  
PANAMA CITY, FL 32404 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:** LINDA SALINAS

03/28/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            ROMINE, STAN  
Address        6700 OAKSHORE DRIVE  
                  APT 101  
City-State-Zip: PANAMA CITY FL 32404

Title            DIRECTOR  
Name            GEORGE, LESTER  
Address        6700 OAKSHORE DRIVE  
                  APT 307  
City-State-Zip: PANAMA CITY FL 32404

Title            DIRECTOR, VP  
Name            SALINAS, LINDA  
Address        6700 OAKSHORE DR  
                  APT 309  
City-State-Zip: PANAMA CITY FL 32404

Title            DIRECTOR  
Name            DINKINS, VIVIAN  
Address        6700 OAKSHORE DR.  
                  202  
City-State-Zip: PANAMA CITY FL 32404

Title            SECRETARY  
Name            ATKISSON, SHANNON  
Address        14080 PLEASANT HILL RD  
City-State-Zip: PICAYUNE MS 39466

Title            DIRECTOR, TREASURER  
Name            SKILES, BRISBIN  
Address        6700 OAKSHORE DR  
                  #104  
City-State-Zip: PANAMA CITY FL 32404

Title            DIRECTOR  
Name            DAVIS, JAMES  
Address        2637 N EAST AVE  
City-State-Zip: PANAMA CITY FL 32405

Title            DIRECTOR  
Name            BACHELDER, JULIA  
Address        44680 MOSQUITO HEIGHTS RD  
City-State-Zip: PERHAM MN 56573

*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:** LINDA SALINAS

VP

03/28/2016

Electronic Signature of Signing Officer/Director Detail

Date