

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2001 8:00 am
Secretary of State

02-05-2001 90119 017 ****61.25

DOCUMENT # 744344

1. Entity Name

WATERS' EDGE EAST CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

2815 SOUTH ATLANTIC AVE.
 COCOA BEACH FL 32931

Mailing Address

2815 SOUTH ATLANTIC AVE.
 SUITE 104
 COCOA BEACH FL 32931
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1942425

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~WELCH, PHILIP~~
~~2815 S ATLANTIC AVE~~
~~#506~~
~~COCOA BEACH FL 32931~~

Name **Robert W. Luhn**
 Street Address (P.O. Box Number is Not Acceptable)
2815 S. ATLANTIC AVE #601
 City **Cocoa Beach** FL Zip Code **32931**

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.

SIGNATURE

Robert W. Luhn **Robert W. Luhn**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/29/01
 DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	☒ Delete
NAME	WELCH, PHILIP	
STREET ADDRESS	2815 S ATLANTIC AVE SUITE 506	
CITY-ST-ZIP	COCOA BEACH FL 3293	
TITLE	VP	☐ Delete
NAME	LUHN, BOB	
STREET ADDRESS	2815 S ATLANTIC AVE #601	
CITY-ST-ZIP	COCOA BCH FL 32931	
TITLE	T	☐ Delete
NAME	MORGAN, JIM	
STREET ADDRESS	2815 S ATLANTIC AVE #404	
CITY-ST-ZIP	COCOA BEACH FL 32931	
TITLE	AT	☐ Delete
NAME	HARTER, BRUCE	
STREET ADDRESS	2815 S ATLANTIC AVE #507	
CITY-ST-ZIP	COCOA BEACH FL 32931	
TITLE	D	☐ Delete
NAME	FLATLEY, M. J.	
STREET ADDRESS	2815 S ATLANTIC AVE #401	
CITY-ST-ZIP	COCOA BEACH FL 32931	
TITLE	SD	☒ Delete
NAME	DEL VISCIO, LORRAINE	
STREET ADDRESS	2815 S ATLANTIC AVE STE 305	
CITY-ST-ZIP	COCOA BEACH FL 32931	

TITLE	V	☐ Change ☒ Addition
NAME	WICHLACZ, JIM	
STREET ADDRESS	2815 S. ATLANTIC AVE. #206	
CITY-ST-ZIP	COCOA BEACH, FL 32931	
TITLE	P	☒ Change ☐ Addition
NAME	LUHN, BOB	
STREET ADDRESS	2815 S. ATLANTIC AVE. #601	
CITY-ST-ZIP	COCOA BEACH, FLORIDA 32931	
TITLE		☐ Change ☐ Addition
NAME	SAME	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	S	☒ Change ☐ Addition
NAME	HARTER, BRUCE	
STREET ADDRESS	2815 S. ATLANTIC AVE. #507	
CITY-ST-ZIP	COCOA BEACH, FL 32931	
TITLE	D	☐ Change ☒ Addition
NAME	PETRUCI, SUSAN	
STREET ADDRESS	2815 S. ATLANTIC AVE. #503	
CITY-ST-ZIP	COCOA BEACH, FL 32931	
TITLE	D	☐ Change ☒ Addition
NAME	OPEL, DON	
STREET ADDRESS	2815 S. ATLANTIC AVE. #607	
CITY-ST-ZIP	COCOA BEACH, FL 32931	

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

James Morgan **JAMES MORGAN** **1/30/01** **321-783-2942**
 Signature and Typed or Printed Name of Signing Officer or Director Date Daytime Phone #

CR2E037 (10/00)