2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 24, 2002 8:00 am
Secretary of State
02-24-2002 90027 048 ****61.25

DOCUMENT # 744344

1. Entity Name

WATERS' EDGE EAST CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2815 SOUTH ATLANTIC AVE. COCOA BEACH FL 32931	2815 SOUTH ATLANTIC AVE. SUITE 104 COCOA BEACH FL 32931 US

DO NOT WRITE IN THIS SPACE

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
LUHN, ROBERT W. 2815 S ATLANTIC AVE #601 COCOA BEACH FL 32931	Name JIM WICHLACZ Street Address (P.O. Box Number is Not Acceptable) 2815 S. ATLANTIC AVE #206 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.

X SIGNATURE James M. Wichlacz 2/11/2002
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	F P WICHLACZ, JIM 2815 S ATLANTIC AVENUE, # 206 COCOA BEACH FL 32931	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VICKIE MEYER 2815 S. ATLANTIC AVE #707 COCOA BEACH, FL 32931	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P LUHN, BOB 2815 S ATLANTIC AVE #601 COCOA BCH FL 32931	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V DON GPEL 2815 S. ATLANTIC AVE #607 COCOA BEACH, FL 32931	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MORGAN, JIM 2815 S ATLANTIC AVE #404 COCOA BEACH FL 32931	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOB CIRALDO 2815 S. ATLANTIC AVE #107 COCOA BEACH, FL 32931	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S HARTER, BRUCE 2815 S ATLANTIC AVE #507 COCOA BEACH FL 32931	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MERTON HUTTON 2815 S. ATLANTIC AVE 207 COCOA BEACH, FL 32931	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FLATLEY, M. J. 2815 S ATLANTIC AVE #401 COCOA BEACH FL 32931	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PETRUCCI, SUSAN 2815 S ATLANTIC AVENUE # 503 COCOA BEACH FL 32931	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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.

X SIGNATURE: James M. Wichlacz FILED 2/11/2002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #