

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F95000005786

Entity Name: WATERMARK REALTY, INC.

FILED
May 20, 2009
Secretary of State**Current Principal Place of Business:**1580 SAWGRASS CORPORATE PARKWAY
SUITE 400
SUNRISE, FL 33323 US**New Principal Place of Business:****Current Mailing Address:**24301 WALDEN CENTER DRIVE
BONITA SPRINGS, FL 34134 US**New Mailing Address:**

FEI Number: 65-0619884

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:HASTINGS, VIVIEN N
24301 WALDEN CENTER DRIVE
BONITA SPRINGS, FL 34134 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: D () Delete
Name: FRY, DAVID L
Address: 24301 WALDEN CENTER DR
City-St-Zip: BONITA SPRINGS, FL 34134 USTitle: DPS () Delete
Name: MESA, REINALDO L
Address: 24301 WALDEN CENTER DR
City-St-Zip: BONITA SPRINGS, FL 34134 USTitle: VAS () Delete
Name: SHEEHAN, ROSE
Address: 24301 WALDEN CENTER DR
City-St-Zip: BONITA SPRINGS, FL 34134Title: V () Delete
Name: BARBER, RICHARD W
Address: 24301 WALDEN CENTER DR
City-St-Zip: BONITA SPRINGS, FL 34134Title: V () Delete
Name: DEVENDORF, RUSSELL
Address: 24301 WALDEN CENTER DR
City-St-Zip: BONITA SPRINGS, FL 34134Title: VT () Delete
Name: LEITH, SHEILA
Address: 24301 WALDEN CENTER DR
City-St-Zip: BONITA SPRINGS, FL 34134**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
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City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

SIGNATURE: VIVIEN N. HASTINGS

RA

05/20/2009

Electronic Signature of Signing Officer or Director

Date

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