2002 UNIFORM BUSINESS REPORT (UBR)

F97000004393

DOCUMENT #

changed, or on an attachr

SIGNATURE:

Secretary of State 1. Entity Name 02-14-2002 90086 049 ***150.00 WATER CLUB DEVELOPMENTS INC. Principal Place of Business Mailing Address 2200 YONGE STREET, SUITE 1600 2200 YONGE STREET. SUITE 1600 TORONTO, ONTARIO TORONTO, ONTARIO CANADA M45 2C6 CANADA M45 2C6 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 98-0177504 Not Applicable Zip Country -Country = ---\$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code 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 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 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition CR2E034 (9/01 TITLE ☐ Delete NAME NAME Julien, Robert STREET ADDRESS STREET ADDRESS 2200 YONGE ST., STE. 1600, TORONTO, ONT. CITY-ST-ZIP CHTY-ST-ZIP CANADA M45 2C6 TITLE ☐ Change ☐ Addition TITLE SVC ☐ Delete NAME NAME MOOG, DELIA STREET ADDRESS STREET ADDRESS 2200 YONGE ST., STE. 1600, TORONTO, ONT. CITY-ST-ZIP CITY-ST-ZIP. CANADA M45:2C6= -----☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME CLARKE, MICHAEL STREET ADDRESS STREET ADDRESS 2200 YONGE ST., STE. 1600, TORONTO, ONT. CITY-ST-ZIP CITY-ST-7IP CANADA M45 2C6 ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF

13. Thereby 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

Feb 14, 2002 8:00 am