NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State
05-27-2002 90439 029 ****61.25

DOCUMENT # N01000004411

1. Entity Name

Water's Edge at the Narrows Condominium Association, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
36 Gulf Blvd.	36 Gulf Blvd.
Suite, Apt. #, etc. Unit 2	Suite, Apt. #, etc. Unit 2
City & State Indian Rocks Beach, FL	City & State Indian Rocks Beach, FL
Zip 33785 Country US	Zip 33785 Country US

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3728792 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: Anthony Fernandez

Street Address (P.O. Box Number is Not Acceptable): 36 Gulf Boulevard Unit 2

City: Indian Rocks Beach FL Zip Code: 33785

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: Anthony Fernandez May 1 2002

Signature required or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS $61.25 Initial or Amended UBR ☐

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	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D Christopher A. Kerr 36 Gulf Blvd. # 5 Indian Rocks Beach, FL 33785
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP/D Charles Heller 19717 Gulf Blvd. # 14 Indian Shores, FL 33785
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST/D Anthony Fernandez 36 Gulf Blvd. # 2 Indian Rocks Beach, FL 33785
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
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CR2E037B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Anthony Fernandez May 1 2002 727-596-9713

SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL Date Daytime Phone #