

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000839

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: WATERSIDE AT PALM COAST CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

114 CLUBHOUSE DRIVE  
PALM COAST, FL 32137

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 354914  
PALM COAST, FL 32135

**New Mailing Address:**

FEI Number: 30-0147996      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CHRISTINE & CHRISTINE, P.A.  
28 CORDOVA STREET  
ST. AUGUSTINE, FL 32084      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: P ( ) Delete  
Name: CROCETTA, BOB  
Address: 114 CLUBHOUSE DR., UNIT 206  
City-St-Zip: PALM COAST, FL 32137

Title: D ( ) Delete  
Name: WILLIAMS, JACK  
Address: 80 CLUBHOUSE DR., UNIT 306  
City-St-Zip: PALM COAST, FL 32137

Title: S ( ) Delete  
Name: STEGER, PAMELA  
Address: 104 CLUB HOUSE DR., UNIT 210  
City-St-Zip: PALM COAST, FL 32137

Title: V ( ) Delete  
Name: LIBRIZZI, JOSEPH  
Address: 102 CLUBHOUSE DR. #308  
City-St-Zip: PALM COAST, FL 32137

Title: T ( ) Delete  
Name: THALER, RONALD  
Address: 2841 NW 58TH BLVD.  
City-St-Zip: GAINESVILLE, FL 32606

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BOB CROCETTA

P

04/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date