

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19330

FILED  
Jan 21, 2010  
Secretary of State

**Entity Name:** WATERSIDE TOWNHOMES COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

12301 SW 132 CT  
MAIMI, FL 33186 US

**New Principal Place of Business:**

**Current Mailing Address:**

12301 SW 132 CT  
MAIMI, FL 33186 US

**New Mailing Address:**

**FEI Number:** 59-2969871      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CARLOS TRIAY P.A  
3750 NW 87 AVE  
100  
DORAL, FL 33178 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: PD  
Name: SAKOWITZ, ROBERT  
Address: 12841 S. CALUSA CLUB DR  
City-St-Zip: MIAMI, FL 33186 US

Title: VPD  
Name: GARCES, JAIRO  
Address: 13943 SW 281 TERR  
City-St-Zip: HOMESTEAD, FL 33033 US

Title: SD  
Name: CHRISTIANS, DARRELL  
Address: 18901 SW 359 ST  
City-St-Zip: HOMESTEAD, FL 33037 US

Title: D  
Name: SAKOWITZ, RUTH  
Address: 8650 SW 84 CT  
City-St-Zip: MIAMI, FL 33143 US

Title: D  
Name: SALDANAS, NEMROD  
Address: 3250 NW 86 ST  
City-St-Zip: MIAMI, FL 33147 US

I hereby 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 all other like empowered.

SIGNATURE: ROBERT SAKOWITZ

PD

01/21/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date