

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 07, 2007  
Secretary of State**

DOCUMENT# N32346

Entity Name: WATER'S EDGE ESTATES OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

291 FISHERMAN'S  
JUPITER, FL 33477 US

**New Principal Place of Business:**

**Current Mailing Address:**

291 FISHERMAN'S  
JUPITER, FL 33477 US

**New Mailing Address:**

FEI Number: 65-0633489      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

JAY LEVINE PA  
3300 PGA BLVD  
#970  
PALM BCH. GARDENS, FL 33410 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 ( ) Delete  
Name: MASON, JILL  
Address: 241 FISHERMAN WAY  
City-St-Zip: JUPITER, FL 33477

Title: STD ( ) Delete  
Name: CHANEY, PAUL  
Address: 378 FISHERMANS WAY  
City-St-Zip: JUPITER, FL 33477

Title: VD ( ) Delete  
Name: GALANT, LINDA  
Address: 221 FISHERMAN'S WAY  
City-St-Zip: JUPITER, FL 33477

Title: D ( ) Delete  
Name: WOOL, NETTA  
Address: 370 FISHERMAN'S WAY  
City-St-Zip: JUPITER, FL 33477

Title: D ( ) Delete  
Name: SEE, SCOTT  
Address: 280 FISHERMAN'S WAY  
City-St-Zip: JUPITER, FL 33477

**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 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: PAUL E. CHANEY

STD

02/07/2007

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

\_\_\_\_\_  
Date