2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N97000000495

1. Entity Name
W/ATERWAYS MARINA CONDOMINIUM ASSOCIATION



FILED Apr 30, 2008 08:00 AM Secretary of State

INC.	VATS MARINA CONDOMINI	OW ASSOCIATION,					
Principal Place of Business 3601 N E 207TH STREET AVENTURA, FL 33180		Mailing Address 630 MAPLEWOOD DRIVE 100 JUPITER, FL 33458			I NDIKI BOKI BEKKI DOKI BOKK BOKI BOK	ije inibi diki	
2. Principal P	Place of Business - No P.O. Box #	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04252008 Chg	-NP CR2E037 (*	12/06)	
City & State		City & State		4. FEI Number 65-0714782			olied For Applicable
Zıp	Country	Zip	Country	5. Certificate of Statu		.75 Addit	tional
	6. Name and Address of Current F	Registered Agent		7. Name and Addres	ss of New Registered Ager	nt	
			Name				
GRAZIOTTO, RAYMOND E 630 MAPLEWOOD DRIVE			Street Address		t Acceptable)		
100 JUPITER,	FI 33458						
00	, E 00 100		City		FL	Zip Code	
	named entity submits this statement for tions of registered agent.	the purpose of changing its re	egistered office or registe	ered agent, or both, in the	e State of Florida. I am famil	liar with, a	ind accept
SIGNATURE	Signature, typed or printed name of registered agent a	nd live il applicable (NOTE, F	legistered Agent signature require	d when reinstating)	DATE		
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Camp Trust Fund Co		\$5.00 May Be Added to Fees	Make check pa Florida Departme	-	ite
10.		Trust Fund Co	ntribution.	Added to Fees	•	nt of Sta	
10. HILE NAME STREET ADDRESS CITY-ST-ZIP	Due by May 1, 2008	Trust Fund Co.	ntribution.	Added to Fees ADDITIONS/CHANGES	Florida Departme TO OFFICERS AND DIRECT	nt of Sta TORS IN 1 Change	10 Addition
TITLE NAME STREET ADDRESS	Due by May 1, 2008 OFFICERS AND DIR PD JACKSON-POWNELL, BRIAN 212 THREE ISLANDS BLVD STE HALLANDALE, FL 33009 D BYRON, SAMUEL 3601 NE 207TH ST	Trust Fund Co.	11. TITLE NAME STREET ADDRESS	Added to Fees ADDITIONS/CHANGES	Florida Departme TO OFFICERS AND DIRECT D J00000937707 27/08-80061-011	nt of Sta TORS IN 1 Change	10 Addition
ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Due by May 1, 2008 OFFICERS AND DIR PD JACKSON-POWNELL, BRIAN 212 THREE ISLANDS BLVD STE HALLANDALE, FL 33009 D BYRON, SAMUEL	Trust Fund Cod ECTORS Delete 203	11. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	Added to Fees ADDITIONS/CHANGES	Florida Departme TO OFFICERS AND DIRECT J00000937707 27/08-80061-011	TORS IN 1 Change 61.25 Change	Addition
ITTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Due by May 1, 2008 OFFICERS AND DIR PD JACKSON-POWNELL, BRIAN 212 THREE ISLANDS BLVD STE HALLANDALE, FL 33009 D BYRON, SAMUEL 3601 NE 207TH ST MIAMI, FL 33180 D COLTUNE, JON 3601 N E 207TH STREET	Trust Fund Col ECTORS Delete 203 Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Added to Fees ADDITIONS/CHANGES	Florida Departme TO OFFICERS AND DIRECT J00000937707 27/08-80061-011	nt of Sta TORS IN 1 Change 61.25 Change	Addition Addition
ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	Due by May 1, 2008 OFFICERS AND DIR PD JACKSON-POWNELL, BRIAN 212 THREE ISLANDS BLVD STE HALLANDALE, FL 33009 D BYRON, SAMUEL 3601 NE 207TH ST MIAMI, FL 33180 D COLTUNE, JON 3601 N E 207TH STREET AVENTURA, TX 33180 T TAYLOR, WILLIAM E 630 MAPLEWOOD DRIVE, #100	Trust Fund Co. ECTORS Delete Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	Added to Fees ADDITIONS/CHANGES	Florida Departme TO OFFICERS AND DIRECT J00000937707 27/08-80061-011	nt of Sta TORS IN 1 Change 61.25 Change Change	Addition Addition

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

F. TAY L TRUB. William E Taylon

425-08

561-625-9443