2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N20712 1. Entity Name. WATERSEDGE AT THE LAKES OF DELRAY II PROPERTY OW NERS ASSOCIATION, INC.

FILED Apr 02, 2002 8:00 am Secretary of State

04-02-2002 90044 009 ****61.25

Principal Place of Business			Mailir	ng Address							
PRIME MANAGEMENT GROUP 6300, PARK OF COMMERCE BLVD BOCA+RATON FL 33487-8290 US			6300 F	PRIME MANAGEMENT GROUP INC 6300 PARK OF COMMERCE BLVD BOCA RATON FL 33487-8290 US			 				
2. Principal Place of Business				3. Mailing Address							
Suite, Apt. #, etc.				Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & State			Ci	City & State			4. FEI Number 6.	4. FEI Number 65-0010626			
Zip Country			Zi	Zip Cou						3.75 Additional e Required	
6. Name and Address of Current F							7. Name and Address of New Registered Agent				
						ame					
SWATT, MYRON PRIME MANAGEMENT GROUP, INC.					S	Street Address (P.O. Box Number is Not Acceptable)					
6300 PARK OF COMMERCE BLVD. BOCA RATON FL 33487				City				FL	Zip Code	,	
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.											
4. The disertential strategy destricts this statement for the purpose of entanging its registered entire of registered agoing or both, in the state of French.											
SIGNATURE											
	Signature, typed o	printed name of registered age	nt and title if ap	plicable. (NOTE	Registered Age	nt signature	required when reinstating)	DATE			
FILE NOW: FEE IS \$61.25				Election Campaign Fin Trust Fund Contributio			\$5.00 May Be Added to Fees Make Check Payable to Department of State				
10.		OFFICERS AND D	IRECTORS	}	11.		ADDITIONS/CHANG	ES TO OFFICERS AND DIF	RECTORS IN	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		.ig Y=DR:-#103 ACH FL 33484		☐ Delete	TITLE NAME STREET AC CITY-ST-	DRESS /	KLAHA, ZEL 15074 WITNE DELRAY BEN	I'G Y ROAD # 2 CH FL 3348	□ Change 02 `	Addition 3	
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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 and accurate and that my signature shall have the same legal effect as if made under oath; that I am and fice 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.

LAWBENCE SIEBER 3, SIGNATURE