

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29416

Entity Name: WATERSIDE VILLAGE OF PALM BEACH, CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**132 WATERSIDE DR.
HYPOLUXO, FL 33462**Current Mailing Address:**132 WATERSIDE DR.
HYPOLUXO, FL 33462 US**FEI Number:** 65-0118157**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CASEY, STACEY E
132 WATERSIDE DRIVE
HYPOLUXO, FL 33462 US*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:** STACEY E. CASEY

01/26/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name MONGRAIN, ANDRE
Address 721 WATERSIDE DRIVE
City-State-Zip: HYPOLUXO FL 33462

Title TREASURER
Name COMTOIS, CLAUDE
Address 432 WATERSIDE DRIVE
City-State-Zip: HYPOLUXO FL 33462

Title S, VP
Name DEMERS, JEAN CLAUDE
Address 541 WATERSIDE DRIVE
City-State-Zip: HYPOLUXO FL 33462

Title D
Name CADIEUX, NORMAND
Address 409 WATERSIDE DRIVE
City-State-Zip: HYPOLUXO FL 33462

Title D
Name MARTEL, CLAUDE
Address 531 WATERSIDE DRIVE
City-State-Zip: HYPOLUXO FL 33462

Title D
Name PETRESCU, MARIAN
Address 203 WATERSIDE DRIVE
City-State-Zip: HYPOLUXO FL 33462

Title DIRECTOR
Name SHANE, MICHAEL
Address 678 WATERSIDE DRIVE
City-State-Zip: HYPOLUXO FL 33462

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: ANDRE MONGRAIN

PRESIDENT

01/26/2016

Electronic Signature of Signing Officer/Director Detail

Date