

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N33634

**FILED**  
**Mar 16, 2017**  
**Secretary of State**  
**CC4996107189**

**Entity Name:** THE WATERWAY RECREATION ASSOCIATION, INC.

**Current Principal Place of Business:**

304-308 GOLFOVIEW RD.  
NORTH PALM BEACH, FL 33408

**Current Mailing Address:**

11621 KEW GARDENS AVE  
SUITE 200  
PALM BEACH GARDENS, FL 33410 US

**FEI Number:** 65-0160109

**Certificate of Status Desired:** No

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

COPPLE SACHS COPPLE  
11780 US HIGHWAY ONE  
SUITE 105  
PALM BEACH GARDENS, FL 33408 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:** RYAN S COPPLE

03/16/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name BITTER, PATRICIA  
Address 11621 KEW GARDENS AVE  
SUITE 200  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title PRESIDENT  
Name BELUK, STEPHEN  
Address 11621 KEW GARDENS AVE  
SUITE 200  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title TREASURER  
Name MANCHESTER, KURT  
Address 11621 KEW GARDENS AVE  
SUITE 200  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title SECRETARY  
Name CLARK, DAN  
Address 11621 KEW GARDENS AVE  
SUITE 200  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR  
Name ROSENBLATT, STEVEN  
Address 11621 KEW GARDENS AVE  
SUITE 200  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR  
Name RYAN, WILLIAM  
Address 11621 KEW GARDENS AVE  
SUITE 200  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR  
Name TENAGLIA, LINA  
Address 11621 KEW GARDENS AVE  
SUITE 200  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR  
Name MCCALLUM, SHELIA  
Address 11621 KEW GARDENS AVE  
SUITE 200  
City-State-Zip: PALM BEACH GARDENS FL 33410

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*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:** PATRICIA BITTER

VICE PRESIDENT

03/16/2017

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           TRAVIS, PAUL  
Address        11621 KEW GARDENS AVE  
                  SUITE 200  
City-State-Zip: PALM BEACH GARDENS FL 33410