

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N49011

**FILED**  
**Feb 11, 2014**  
**Secretary of State**  
**CC4657480466****Entity Name:** WATER'S EDGE OF TAMARAC HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**5900 NW 93RD TERR  
TAMARAC, FL 33321**Current Mailing Address:**5900 NW 93RD TERR  
TAMARAC, FL 33321 US**FEI Number: NOT APPLICABLE****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**MCMAHON, DON  
5962 NW 93 TERR  
TAMARAC, FL 33321 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**Title            PRESIDENT  
Name            RADOMSKI, ROY  
Address        5900 NW 93RD TERR  
City-State-Zip: TAMARAC FL 33321Title            TR  
Name            LAWSON, PAT  
Address        5900 NW 93RD TERR  
City-State-Zip: TAMARAC FL 33321Title            VP  
Name            SANTUCCI , PAUL  
Address        5900 NW 93RD TERR  
City-State-Zip: TAMARAC FL 33321Title            SECRETARY  
Name            PATO, ANNE  
Address        5900 NW 93RD TERR  
City-State-Zip: TAMARAC FL 33321Title            CORRESPONDING SECRETARY  
Name            SOPCHECK, DONNA  
Address        5900 NW 93RD TERR  
City-State-Zip: TAMARAC FL 33321Title            DIRECTOR  
Name            DICKSON, ARLENE  
Address        5900 NW 93RD TERR  
City-State-Zip: TAMARAC FL 33321Title            DIRECTOR  
Name            DOUGLAS, LEON  
Address        5900 NW 93RD TERR  
City-State-Zip: TAMARAC FL 33321

*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: PAT LAWSON****TREASURER****02/11/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date