

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 04, 2000 8:00 am
Secretary of State
 08-04-2000 90006 017 ***150.00

DOCUMENT # 183788

1. Entity Name
WATER'S EDGE HOUSE, INC.

Principal Place of Business
**286 BAL BAY DRIVE
 BAL HARBOUR FL 33154**

Mailing Address
**286 BAL BAY DRIVE
 BAL HARBOUR FL 33154**

A0071384



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-0757307**

Applied For
 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**ROGERS, BART
 286 BALBAY DRIVE
 APT 2A
 BAY HARBOUR FL 33154**

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00
 After SEPTEMBER 13, 2000 Min. will be \$750.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	ROGERS, BART M	
STREET ADDRESS	286 BAL BAY DRIVE	
CITY-ST-ZIP	BAL HARBOUR FL	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	ROSE, CLARE	
STREET ADDRESS	286 BAL BAY DRIVE	
CITY-ST-ZIP	BAL HARBOR FL	
TITLE	ST	<input checked="" type="checkbox"/> Delete
NAME	PETERSON, HELEN	
STREET ADDRESS	286 BAL BAY DRIVE	
CITY-ST-ZIP	BAL HARBOUR FL	
TITLE	VP	<input type="checkbox"/> Delete
NAME	MAY, TIMOTHY	
STREET ADDRESS	286 BAL BAY DRIVE	
CITY-ST-ZIP	BAL HARBOR FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	SABATINO, JAMES	
STREET ADDRESS	286 BAL BAY DRIVE	
CITY-ST-ZIP	BAL HARBOR FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP	33154	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Thomas Welstead	
STREET ADDRESS	286 Bal Bay Drive	
CITY-ST-ZIP	Bal Harbour, FL 33154	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP	33154	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP	33154	
TITLE	SIT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Joseph Swedrow	
STREET ADDRESS	286 Bal Bay Drive	
CITY-ST-ZIP	Bal Harbour, FL 33154	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **X** SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/27/00 x 867-9393
 Date Daytime Phone #

CR2E034 (5/00)

JOSEPH D. SACHS, CPA, P.A.
Certified Public Accountant

(attachment)
Doc # 183788
A0071384
3900 Hollywood Boulevard
Suite 301
Hollywood, Florida 33021
Telephone: (954) 963-1118
Telecopier: (954) 963-1119

August 1, 2000

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: Water's Edge House, Inc. EIN: 59-0757307
Document # 183788

Dear Division of Corporations:

At the request of the above referenced entity, I am forwarding their 2000 Uniform Business Report. As you can see by the completed form there were several changes to the officers and directors for the current year. During the past year the former president, Bart Rogers, was quite ill requiring multiple surgeries in New Jersey (his home state). The original Uniform Business Report was not forwarded to the other officers for completion in a timely manner which prompted your office to send a second notice. To the best of my knowledge, a review of the entity's track record will indicate timely filings in the past. Because of the unique circumstances, we respectfully request that the accompanying Uniform Business Report be accepted with the original fee of \$150.00 enclosed.

If further information is required please contact my office. Thank you for your consideration in this matter.

Very truly yours,
JOSEPH D. SACHS, CPA, P.A.



Joseph D. Sachs, CPA
encl.