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NONPROFIT CORPORATION ANNUAL REPORT **1998**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **701951** **(6)**

1. Corporation Name

WATERVIEW LODGE TWO INC

Principal Place of Business	Mailing Address
331 S4E 15TH STREET POMPANO BCH FL 33060 US	331 SE 15TH ST. APT. 218 POMPANO BCH FL 33060 US

3. Date Incorporated or Qualified: 01/25/1951

4. FEI Number: 59-1981614 ☐ Applied For ☐ Not Applicable

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

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

7. Is this nonprofit corporation a homeowners association? ☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 331 SE 15th Street	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

HOLZ, FRANCES
331 SE 15TH ST
APT 218
POMPANO BEACH FL 33060

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P WALSH, EUGENE 331 SE 15TH ST POMPANO BEACH FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	D Riccitelli, Angelo 331 SE 15th St ~~Pompano Beach FL~~
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JACKSON, HOWARD L 331 SE 15TH ST POMPANO BEACH FL	XX DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	D Patrick Gray 331 SE 15th St ~~Pompano Beach FL~~
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS HOLZ, FRANCES 331 SE 15H ST POMPANO BEACH, FL 00000	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	D Mertie Lloyd 331 SE 15th St ~~Pompano Beach FL~~
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V DANIELI, DOMENIC 331 SE 15TH ST POMPANO BEACH, FL 00000	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	D Guy Renaud 331 SE 15th St Pompano Beach FL
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NICKERSON, CHARLES 331 SE 15TH ST POMPANO BEACH, FL 00000	XX DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ANN BUTLER 331 SE 15TH ST POMPANO BEACH FL	XX DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	

CR2E037 (10/97)

14. 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 annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ 2-9-98