2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Feb 16, 2004 8:00 am **Secretary of State** DOCUMENT # 701951 1. Entity Name 02-16-2004 90031 026 \*\*\*\*61.25 WATERVIEW LODGE TWO INC Principal Place of Business Mailing Address 331 SE 15TH STREET 331 SE 15TH ST. POMPANO BCH FL 33060 APT. 227 POMPANO BCH FL 33060 2. Principal Place of Business 3. Mailing Address <u>331 SE 15th St</u> Suite, Apt. #, etc. Suite, Apt. #, etc CR2E037 (11/03) Apt 218 City & State City & State Applied For 4. FEI Number 59-1981614 Not Applicable Pompano Beach Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Frances Holz MALONEY, LINDA Street Address (P.O. Box Number is Not Acceptable) 331 SE 15TH ST APT 227 331 SE 15th St. POMPANO BEACH FL 33060 Zip Code 33060 <u>Pompano Beach</u> 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. I am familiar with, and accept the obligations of registered agent SIGNATURE 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 Make Check Payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due By May 1, 2004 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE Delete TITLE Maher, Mary Ellen Change 🔀 🛱 Addition RICCITELLI, ANGELO NAME NAME 331 SÉ 15th St 331 SE 15TH ST STREET ADDRESS STREET ADDRESS POMPANO BEACH FL CITY-ST-ZIE CITY-ST-ZIP <u>Pompano Beach FL</u> TITLE Delete TITLE <sup>D</sup>Pat Gray WALSH, EUGENE NAME NAME 331 SE 15th St 331 SE 15TH ST STREET ADDRESS STREET ADDRESS POMPANO BEACH FL Pompano Beach FL CITY-ST-ZIP CITY-ST-ZIP TITI F ☐ Delete TITI F D - Change XX Addition-LLOYD, MERTIE NAME MALAS Jim MATHUS 331 SE 15H ST STREET ADDRESS STREET ADDRESS 331 SE 15th St Pompano Beach FL POMPANO BCH FL CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition SCACCIA, FRED NAME NAME 331 SE 15TH ST STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33060 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition HOLZ, FRANCES NAME NAME 331 SE 15TH ST. STREET ADDRESS STREET ADDRESS POMPANO BCH FL CITY-ST-ZIP CITY-ST-ZIP **⊤/**⊅ TITLE ☐ Delete TITLE ☐ Change Addition APPICELLI, JOAN NAME NAME 331 SE 15TH STREET STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33060 CITY-ST-ZIP CITY-ST-ZIP 12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**FILED**