


2007 NOT-FOR-PROFIT CORPORATION— ANNUAL REPORT (AR)

FILED
Feb 13, 2007 8:00 am
Secretary of State

02-13-2007 90014 049 ****70.00

DOCUMENT # 701951	
1. Entity Name	
WATERVIEW LODGE TWO INC	

Principal Place of Business	Mailing Address
331 SE 15TH STREET POMPANO BCH FL 33060 US	331 SE 15TH ST. APT. 116 POMPANO BCH FL 33060 US

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



1st MOORE CR2E037 (10/06)

4. FEI Number		Applied For
59-1981614		Not Applicable
5. Certificate of Status Desired		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
APPICELLI, JOAN P. 331 SE 15TH STREET APT. 116 POMPANO BEACH FL 33060	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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW: FEE IS \$61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY- ST- ZIP D <input type="checkbox"/> Delete TSIVOULIS, NICHOLS 331 SE 15TH ST POMPANO BEACH FL	TITLE NAME STREET ADDRESS CITY- ST- ZIP Mary Ellen Maher <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 331 SE 15th St Pompano Beach FL 33060		
TITLE NAME STREET ADDRESS CITY- ST- ZIP D <input type="checkbox"/> Delete WALSH, EUGENE 331 SE 15TH ST POMPANO BEACH FL	TITLE NAME STREET ADDRESS CITY- ST- ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP D <input type="checkbox"/> Delete LLOYD, MERTIE 331 SE 15H ST POMPANO BCH FL	TITLE NAME STREET ADDRESS CITY- ST- ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP D <input type="checkbox"/> Delete GRAY, PAT 331 SE 15TH ST POMPANO BEACH FL 33060	TITLE NAME STREET ADDRESS CITY- ST- ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP D <input type="checkbox"/> Delete HOLZ, FRANCES 331 SE 15TH ST. POMPANO BCH FL	TITLE NAME STREET ADDRESS CITY- ST- ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP T <input type="checkbox"/> Delete APPICELLI, JOAN 331 SE 15TH STREET POMPANO BEACH FL 33060	TITLE NAME STREET ADDRESS CITY- ST- ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

SIGNATURE: Joan P. Appicelli Joan P. Appicelli 1/11/07 954-785-2581

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #