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

Mar 23, 2007 08:00 A Secretary of State DOCUMENT # 725974 1. Entity Name UNIT NUMBER TWO WATERGATE ASSOCIATION, INC. Principal Place of Business Mailing Address 11996 CORAL PLACE 11996 CORAL PLACE **BOCA RATON FL 33428 BOCA RATON FL 33428** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State Applied For City & State 4. FEI Number 30-4505522 Not Applicable Zıp Country Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo SAIZ, ELAINE Street Address (P.O. Box Number is Not Acceptable) 11996 CORAL PLACE **BOCA RATON FL 33428** City 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. tille if applicable (NOTE, Registered Agent signature required when reuistating) Signature, typed or printed name of registered agen FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be П Trust Fund Contribution. Due By May 1, 2007 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Delele TITLE Change Addition NAME KLUEFER, BERNARD NAME STREET ADDRESS STREET ADDRESS 22992 TRADEWIND ROAD CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL** U00000677136 change ☐ Addition 03/30/07-80094-013 70.00 TITLE ☐ Delete THE NAME BERRY, NANCY NAME STREET ADDRESS STREET ADDRESS 23050 WATERGATE CIRCLE CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL** TITLE TITLE Change Addition Delete NAME NAME CAPELLANI, JOAN STRUET ADDRESS STREET ADDRESS 22872 NEPTUNE RD CITY-S1-7IP CITY-ST-ZIP **BOCA RATON FL 33428** TITLE ☐ Change Addition Delete TITLE NAME NAME CAPELLAN, PETER STREET ADORESS STREET ADDRESS 22872 NEPTUNE RD CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33428** THE Detete ☐ Change ☐ Addition THE NAME NAME SAIZ, ELAINE STREET ADORESS 11996 CORAL PLACE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33428** TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 offect as if made under eath; 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

ELAINE SAIZ 3/17/07

if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED