

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725974

FILED
Apr 22, 2009
Secretary of State

Entity Name: UNIT NUMBER TWO WATERGATE ASSOCIATION, INC.

Current Principal Place of Business:

11996 CORAL PLACE
BOCA RATON, FL 33428

New Principal Place of Business:

Current Mailing Address:

11996 CORAL PLACE
BOCA RATON, FL 33428

New Mailing Address:

FEI Number: 30-4505522

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SAIZ, ELAINE
11996 CORAL PLACE
BOCA RATON, FL 33428 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KLUEFER, BERNARD
Address: 22992 TRADEWIND ROAD
City-St-Zip: BOCA RATON, FL

Title: D () Delete
Name: BERRY, NANCY
Address: 23050 WATERGATE CIRCLE
City-St-Zip: BOCA RATON, FL

Title: D () Delete
Name: CAPELLANI, JOAN
Address: 22872 NEPTUNE RD
City-St-Zip: BOCA RATON, FL 33428

Title: T () Delete
Name: CAPELLAN, PETER
Address: 22872 NEPTUNE RD
City-St-Zip: BOCA RATON, FL 33428

Title: S () Delete
Name: SAIZ, ELAINE
Address: 11996 CORAL PLACE
City-St-Zip: BOCA RATON, FL 33428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: CAPELLANI, PETER
Address: 22872 NEPTUNE RD
City-St-Zip: BOCA RATON, FL 33428

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELAINE SAIZ

RA

04/22/2009

Electronic Signature of Signing Officer or Director

Date