

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2005 8:00 am
Secretary of State

03-18-2005 90050 041 ****70.00

DOCUMENT # 726946 1. Entity Name WATERWAY WEST, INC.																																																																																																																																																											
Principal Place of Business 315 N. CAUSEWAY NEW SMYRNA BEACH, FL 32169			Mailing Address 315 N. CAUSEWAY NEW SMYRNA BEACH, FL 32169																																																																																																																																																								
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country																																																																																																																																																								
02152005 Chg-NP CR2E037 (10/03)			4. FEI Number 59-1578126																																																																																																																																																								
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required			Applied For <input type="checkbox"/> Not Applicable																																																																																																																																																								
6. Name and Address of Current Registered Agent MARLER, DAVID W 315 N CAUSEWAY C402 NEW SMYRNA BEACH, FL 32169				7. Name and Address of New Registered Agent Name BARGER, GEORGE Street Address (P.O. Box Number is Not Acceptable) 315 N. CAUSEWAY, # D303 City NEW SMYRNA BEACH FL Zip Code 32169																																																																																																																																																							
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. <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> SIGNATURE <small>Signature, typed or printed name of registered agent and title if applicable.</small> </div> <div style="width: 30%; text-align: center;"> PRESIDENT <small>(NOTE: Registered Agent signature required when reinstating)</small> </div> <div style="width: 30%; text-align: right;"> 2/15/05 <small>DATE</small> </div> </div>																																																																																																																																																											
Filing Fee is \$61.25 Due by May 1, 2005		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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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.																																																																																																																																																											
<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> SIGNATURE <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> </div> <div style="width: 30%; text-align: center;"> GEORGE BARGER </div> <div style="width: 30%; text-align: right;"> 2/15/05 (386) 426-3998 <small>Date Daytime Phone #</small> </div> </div>																																																																																																																																																											