


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Mar 28, 2008 8:00 am
Secretary of State

03-28-2008 90023 016 ****61.25

DOCUMENT # 731951			
1. Entity Name WAVECRESTER CONDOMINIUM, INC.			
Principal Place of Business 301 S MIRAMAR AVE INDIALANTIC FL 32903-8133		Mailing Address 301 S MIRAMAR AVE INDIALANTIC FL 32903-8133	
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 (10/07)

4. FEI Number 59-1651860		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent DOUGLAS, ALLISON 301 S. MIRAMAR #105 INDIALANTIC FL 32903		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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, 2008	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	ST ALLISON, DOUGLAS 301 S. MIRAMAR #105 INDIALANTIC FL 32903	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition V Shane Deeley 301 S. Miramar #104 Indialantic, FL 32903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GERACI, ROSE 301 S MIRAMAR AVE #305 INDIALANTIC FL 32903-8133	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition D Adedapo Oduye 301 S. Miramar #303 Indialantic, FL 32903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HORNBECK, JAMES 301 S MIRAMAR AVENUE, APT 201 INDIALANTIC FL 32903	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition D Merrie Sofet 301 S. Miramar #206 Indialantic, FL 32903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEE, JUDY 301 S MIRAMAR #106 INDIALANTIC FL 32903	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition ST Douglas Allison 301 S. Miramar #105 Indialantic, FL 32903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COYL, ED 301 S. MIRAMAR #203 INDIALANTIC FL 32903	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition D Hornbeck, James 301 S. Miramar #201 Indialantic, FL 32903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BRADLEY, DAVID 301 S. MIRAMAR #305 INDIALANTIC FL 32903	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: Douglas Allison Douglas Allison 2/22/08 321-727-2552