## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#734720**

FILED Apr 07, 2009 Secretary of State

Entity Name: WATER GLADES 200 CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 5540 NORTH OCEAN DRIVE SINGER ISLAND, FL 334042551 **Current Mailing Address: New Mailing Address:** 5540 NORTH OCEAN DRIVE SINGER ISLAND, FL 334042551 FEI Number: 59-1632669 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LEVINE, JAY STEVEN 2500 N. MILITARY TRAIL, SUITE 490 BOCA RATON, FL 33431 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition PALAZZO, JACK CLARK, FRAN Name: Name: 5550 N. OCEAN DR 17D Address: 5550 N. OCEAN DR Address: City-St-Zip: SINGER ISLAND, FL 33404 City-St-Zip: SINGER ISLAND, FL 33404 Title: PD ( ) Delete Title: () Change () Addition STEIN, ROBERT Name: Name: Address: 5550 N. OCEAN DR 20B Address: City-St-Zip: SINGER ISLAND, FL 33404 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition BRUCE, WILLIAM BRUCE, WILLIAM Name: Name: 5550 N OCEAN DR 18B 5550 N OCEAN DR 18B Address: Address: City-St-Zip: SINGER ISLAND, FL 33404 City-St-Zip: SINGER ISLAND, FL 33404 Title: ( ) Delete Title: () Change () Addition Name: ROBBINS, SAUL Name: 5550 N OCEAN DR 22B/D Address: Address: City-St-Zip: SINGER ISLAND, FL 33404 City-St-Zip: Title: DS () Delete Title: () Change () Addition COOPER, BERNICE Name: Name: 5550 NORTH OCEAN DR 19D Address: Address: City-St-Zip: SINGER ISLAND, FL 33404 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition VARNUM, CAROL VARNUM, CAROL Name: Name: Address: 5550 N. OCEAN DR Address: 5550 N. OCEAN DR SINGER ISLAND, FL 33404 SINGER ISLAND, FL 33404 City-St-Zip: 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: CHRIS DE VITO M 04/07/2009