2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734740

Apr 07, 2009 Secretary of State

Entity Name: WATER GLADES 100 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5540 N. OCEAN DR.

SINGER ISLAND, FL 334042551 US

Current Mailing Address: New Mailing Address:

5540 N. OCEAN DR.

SINGER ISLAND, FL 334042551 US

FEI Number: 59-1632661 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:

JAY STEVEN LEVINE, P.A 2500 N MILITARY TRÁIL, 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 MADONIA, PETER DR. Name: 5440 N. OCEAN DR 4A Address:

City-St-Zip: WEST PALM BEACH, FL 33404

Title: PD () Delete MCCULLOCH, BOB Name: Address: 5540 N OCEAN DR 7B City-St-Zip: SINCER ISLAND, FL 33404

Title: () Delete RAYMOND PINARD Name:

5540 N OCEAN DRIVE, APT. #15B Address: City-St-Zip: SINGER ISLAND, FL 33404

Title: () Delete BEVERLY, TROOST Name:

Address: 5540 N OCEAN DR 1B City-St-Zip: SAUCER ISLAND, FL 33404

Title: (X) Delete

FARIS, CATHLEEN Name: 5540 N OCEAN 3A Address: SAUCER ISLAND, FL 33404 City-St-Zip:

(X) Change () Addition

PINARD, RAY Name:

Address: 5440 N. OCEAN DR 15B City-St-Zip: SINGER ISLAND, FL 33404

Title: (X) Change () Addition

Name: MCCULLOCH, BOB Address: 5540 N OCEAN DR 7B City-St-Zip: SINGER ISLAND, FL 33404

Title: PD (X) Change () Addition

ROACH, STEVE Name: 5540 N OCEAN DRIVE, Address: City-St-Zip: SINGER ISLAND, FL 33404

Title: DS (X) Change () Addition

Name: BEVERLY, TROOST Address: 5540 N OCEAN DR 1B City-St-Zip: SINGER ISLAND, FL 33404

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: CHRIS DE VITO Μ 04/07/2009