2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# 738428

Entity Name: WATER BRIDGE 3 ASSOCIATION, INC.

Current Principal Place of Business:

1080 DEL LAGO CIRCLE
SUNRISE, FL 33313

New Principal Place of Business:

Current Mailing Address:

1080 DEL LAGO CIRCLE
SUNRISE, FL 33313

New Mailing Address:

2531 ARAGON BLVD.
SUNRISE, FL 33322

FEI Number: 59-1782759 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHNAITMAN-GELLER, TRACEY
2531 ARAGON BLVD
SUNRISE, FL 33322 US

Name and Address of New Registered Agent:

GELLER-SCHNAITMAN, TRACEY
2531 ARAGON BLVD
SUNRISE, FL 33322 US

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: TRACEY GELLER-SCHNAITMAN 04/30/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ADAMS, THOMAS
Address: 1080 DEL LAGO CIR.
City-St-Zip: FORT LAUDERDALE, FL 33313

Title: VP ( ) Delete
Name: FEARON, JOSEPH
Address: 1080 DEL LAGO CIR.
City-St-Zip: FORT LAUDERDALE, FL 33313

Title: D ( ) Delete
Name: EMMA, BANYI
Address: 1080 DEL LAGO CIRCLE #307
City-St-Zip: SUNRISE, FL 33313

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ADAMS, THOMAS
Address: 1080 DEL LAGO CIR.
City-St-Zip: FORT LAUDERDALE, FL 33313

Title: VPD (X) Change ( ) Addition
Name: FEARON, JOSEPH
Address: 1080 DEL LAGO CIR.
City-St-Zip: FORT LAUDERDALE, FL 33313

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: THOMAS ADAMS PRES 04/30/2009
Electronic Signature of Signing Officer or Director Date