

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742879

FILED
Apr 11, 2006
Secretary of State

Entity Name: CAMP BISCAYNE WATERWAY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3505 MAIN LODGE DRIVE
COCONUT GROVE, FL 33133

New Principal Place of Business:

New Mailing Address:

3120 MUNROE DRIVE
COCONUT GROVE, FL 33133

Current Mailing Address:

3505 MAIN LODGE DRIVE
COCONUT GROVE, FL 33133

FEI Number: 59-2115776

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRISON, JOSEPH
3120 MONROE DR.
COCONUT GROVE, FL 33133 US

Name and Address of New Registered Agent:

HARRISON, JOSEPH
3120 MUNROE DR.
COCONUT GROVE, FL 33133 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:

Electronic Signature of Registered Agent

04/11/2006

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COREY, LINDA H
Address: 3506 BANYAN CIRCLE
City-St-Zip: COCONUT GROVE, FL 33133

Title: SD () Delete
Name: HARRISON, JOSEPH JR.
Address: 3120 MONROE DR.
City-St-Zip: COCONUT GROVE, FL

Title: TD () Delete
Name: SWETLAND-JONES, POLLY
Address: BOX 2450 BENTLEY HILL ROAD
City-St-Zip: ARLINGTON, VT 05250

Title: D (X) Delete
Name: TORRES, DELI
Address: 3090 MUNROE DR.
City-St-Zip: COCONUT GROVE, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: COREY, LINDA H
Address: 3505 MAIN LODGE DRIVE
City-St-Zip: COCONUT GROVE, FL 33133

Title: SD (X) Change () Addition
Name: HARRISON, JOSEPH R
Address: 3120 MUNROE DR.
City-St-Zip: COCONUT GROVE, FL

Title: D (X) Change () Addition
Name: TORRES, DELI
Address: 3090 MUNROE DRIVE
City-St-Zip: COCONUT GROVE, FL 33133

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSEPH R. HARRISON

Electronic Signature of Signing Officer or Director

T

04/11/2006

Date