

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742879

FILED
Sep 01, 2008
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:

Current Mailing Address:

3120 MUNROE DRIVE
COCONUT GROVE, FL 33133

New Mailing Address:

FEI Number: 59-2115776 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: IVLER, DAVID
Address: 3503 MAIN LODGE DRIVE
City-St-Zip: COCONUT GROVE, FL 33133

Title: D () Delete
Name: HARRISON, JOSEPH R
Address: 3120 MUNROE DR.
City-St-Zip: COCONUT GROVE, FL

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: FAIRBANKS, RICHARD
Address: 3505 MAIN LODGE DRIVE
City-St-Zip: COCONUT GROVE, FL 33133

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: JOSEPH R. HARRISON

D

09/01/2008

Electronic Signature of Signing Officer or Director

_____ Date