

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748993

FILED  
Feb 21, 2012  
Secretary of State

**Entity Name:** FISHERMAN'S WHARF CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2888 OLEANDER STREET  
UNIT C-8  
ST JAMES CITY, FL 33956 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 511  
ST JAMES CITY, FL 33956 US

**New Mailing Address:**

**FEI Number:** 59-2356814

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BECKER & POLIAKOFF, P.A.  
12140 CARISSA COMMERCE COURT  
SUITE 200  
FORT MYERS, FL 33966 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:** P  
**Name:** KETELAAR, PAT  
**Address:** 2912 OLEANDER STREET, UNIT B-2  
**City-St-Zip:** ST JAMES CITY, FL 33956

**Title:** VP  
**Name:** ARNOLD, BILL  
**Address:** 2888 OLEANDER STREET, UNIT C-5  
**City-St-Zip:** ST JAMES CITY, FL 33956

**Title:** D  
**Name:** THOMPSON, KEN  
**Address:** 2876 OLEANDER STREET, UNIT D-4  
**City-St-Zip:** ST JAMES CITY, FL 33956

**Title:** D  
**Name:** COMPTON, DAN  
**Address:** 2936 OLEANDER STREET, UNIT A-3  
**City-St-Zip:** ST JAMES CITY, FL 33956

**Title:** D  
**Name:** WHITMORE, JIM  
**Address:** 2912 OLEANDER STREET, UNIT B-6  
**City-St-Zip:** ST JAMES CITY, FL 33956

**Title:** S  
**Name:** WALKER, JUDY  
**Address:** 2888 OLEANDER STREET, UNIT C-8  
**City-St-Zip:** ST JAMES CITY, FL 33956

I hereby 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 all other like empowered.

**SIGNATURE:** JUDY B. THEISEN (WALKER)

S

02/21/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date