

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753867

FILED  
Jan 18, 2010  
Secretary of State

**Entity Name:** WATERWAY TERRACE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

300 GOLFVIEW RD.  
NORTH PALM BEACH, FL 33408 US

**New Principal Place of Business:**

**Current Mailing Address:**

300 GOLFVIEW RD.  
NORTH PALM BEACH, FL 33408 US

**New Mailing Address:**

FEI Number: 59-2105717

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VANDERSLUIS, HELEN A DT  
300 GOLFVIEW ROAD #407  
NORTH PALM BEACH, FL 33408 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: MCVHEY, DANIEL  
Address: 300 GOLFVIEW ROAD #501  
City-St-Zip: NO PALM BEACH, FL 33408

Title: V  
Name: CHIOFALLO, ROSEMARY V  
Address: 300 GOLFVIEW ROAD #401  
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: DT  
Name: VANDERSLUIS, HELEN  
Address: 300 GOLFVIEW RD. #407  
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D  
Name: ROSENBLATT, STEVEN  
Address: 300 GOLFVIEW RD. #304  
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D  
Name: RYAN, WILLIAM D  
Address: 300 GOLFVIEW ROAD #301  
City-St-Zip: NORTH PALM BEACH, FL 33408

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: HELEN A. VANDERSLUIS

DT

01/18/2010

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

\_\_\_\_\_  
Date