

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758794

FILED  
Feb 07, 2012  
Secretary of State

**Entity Name:** WATER'S EDGE OF ENGLEWOOD CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

6699 SAN CASA DRIVE  
MANAGER'S OFFICE  
ENGLEWOOD, FL 34224

**New Principal Place of Business:**

**Current Mailing Address:**

6699 SAN CASA DRIVE  
MANAGER'S OFFICE  
ENGLEWOOD, FL 34224

**New Mailing Address:**

**FEI Number:** 59-2392128

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BECKER & POLIAKOFF, P.A.  
6230 UNIVERSITY PARKWAY, SUITE 204  
SARASOTA, FL 34240 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: PRES  
Name: HARRIS, GUY  
Address: 9 POCAHONTAS DRIVE  
City-St-Zip: MIDDLETOWN, RI 02842

Title: VP  
Name: BARONE, JAMES  
Address: 385 KATAN AVE  
City-St-Zip: STATEN ISLAND, NY 34224

Title: SEC  
Name: RABATIC, MILAN  
Address: 141 SESAME RD, W.  
City-St-Zip: ROTONDA WEST, FL 33947

Title: TREA  
Name: TOLEVICH, GEORGE  
Address: 49920 MILLER CT  
City-St-Zip: NEW BALTIMORE, MI 48047

Title: DIR  
Name: WEBB, MICHAEL  
Address: 13764 82ND TERRACE N.  
City-St-Zip: SEMINOLE, FL 33776

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: GUY HARRIS

PRES

02/07/2012

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

\_\_\_\_\_  
Date