# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 759575** 

FILED Mar 25, 2009 Secretary of State

Entity Name: WATERWAY WEST CONDOMINIUM, INC.

465 SWALLOW DR 465 SWALLOW DR

MIAMI, FL 33166 US MIAMI SPRINGS, FL 33166 US

## Current Mailing Address: New Mailing Address:

MCM REALTY PROPERTY MGMT

190 WESTWARD DR, STE A

MIAMI, FL 33166 US

MCM REALTY PROPERTY MGMT

190 WESTWARD DR, STE A

MIAMI SPRINGS, FL 33166 US

FEI Number: 65-0091472 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

# Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MARRERO, MIRIAM C
C/O MCM RLTY PROPERTY MGMT
190 WESTWARD DR, SUITE A
MIAMI, FL 33166 US

MARRERO, MIRIAM C
C/O MCM RLTY PROPERTY MGMT
190 WESTWARD DR, SUITE A
MIAMI SPRINGS, FL 33166 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: MIRIAM C MARRERO 03/25/2009

Electronic Signature of Registered Agent Date

#### OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP ( ) Delete Title: ( ) Change ( ) Addition Name: WEEKS, MANDY Name:

 Address:
 465 SWALLOW DR #6
 Address:

 City-St-Zip:
 MIAMI SPRINGS, FL 33166
 City-St-Zip:

Title: P ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MOTSINGER, LANCE
 Name:

 Address:
 465 SWALLOW DR. #8
 Address:

 City-St-Zip:
 MIAMI SPRINGS, FL 33166 US
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 WINDREM, WILLIAM
 Name:

 Address:
 374 DESOTO DRIVE
 Address:

 City-St-Zip:
 MIAMI SPRINGS, FL 33166
 City-St-Zip:

 $\label{eq:time_special} \mbox{Title:} \qquad \mbox{SD} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{SD} \qquad \mbox{(X) Change () Addition}$ 

 Name:
 HOWARD, MARGINA
 Name:
 HOWARD, MARGINA

 Address:
 465 SWALLOW DR. #5
 Address:
 465 SWALLOW DR. #5

 City-St-Zip:
 MIAMI, FL 33166
 City-St-Zip:
 MIAMI SPRINGS, FL 33166

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: MARGINA HOWARD SEC 03/25/2009