FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F98000004365

WP-WATERMARK, INC.

· · · · · · · · · · · · · · · · · ·	ess
	k investments. LLC. 7735 OLD Georgetown Road D 20814

FILED Jan 21, 1999 8:00am Secretary of State 01-21-1999 90015 047 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

07/31/1998

		-,						
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	Ap	plied For	
21		[26]		APPLIED FOR	Nc	Not Applicable		
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75	Additional		
22		27		5. Certificate of Status Desired	Fee Re	quired		
City & Star	te	City & State		6. Election Campaign Financing	\$5.00	May Be		
23		28		Trust Fund Contribution	Added t			
Zip	Country	Zip Country		8. This corporation owes the current year	ntangible			
24	25	29 30		Personal Property Tax. Yes No				
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registers		<u> </u>	
2 (3 (3 (A (A (A (A (A (A (A (A (
, C.T. CORPORATION SYSTEM								
1200 SOUTH PINE ISLAND ROAD			2 Street Address (P.O. Box Number is Not Acceptable)					
PLAI	NTATION FL 33324		83	 				
	,		"	'}				
			84	City		95 7in (
Alta Champar	RESPONDENCE OF	_ + + + + + + + + + + + + + + + + + + +			F			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered								
863 agent. La	m familiar with, and accept the obligati	ons of Section 607.0505, Flor	rida Statutes	ano componanti S.	on a board or directors. I hereby accept the app	ominimonit as (6)	gistored	
SIGNATURE							1	
JOHATORE	Signature, typed or printed name of registers /Atent	and title if applicable y (NOTE:	Registered Age	nt signature require	ed when reinstating) DATE			
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12	
TITLE	CPT	☐ DELETE	1.1 TITLE		STATE OF SECOND	Change	☐ Addition	
NAME	WASP, THOMAS K		1.2 NAME	1			1	
STREET ADDRESS	40 FLOOR THAT OLD AFORAS	FOWN ROAD 1.3 STREET ADDRESS				ĺ		
CITY-ST-ZIP	BETHESDA MD 20814		1.4 CITY-ST-ZIP				1	
TITLE	WS	☐ DELETE	2.1 TITLE	1-21		Change	Addition	
	PIERCE, DAVID	(L) OLICIC	1	- 1		Gridinge		
NAME	,	2.2 NAME		ì			İ	
STREET ADDRESS	554 PRATT	2.3 STREET ADDRESS						
CITY-ST-ZIP	NORTH SCHAUMBURG IL 6019		2.4 CITY-ST-ZIP					
TITLE C. 7	Done a service of the	☐ DELETE	3.1 TITLE	j	•	Change	☐ Addition	
NAME!	FERRUCI, MARK A		3.2 NAME				į	
STREET ADDRESS	1209 ORANGE STREET		3.3 STREE	T ADDRESS			Ţ,]	
CITY-ST-ZIP	WILMINGTON DE 19801		3.4. CITY-5	ST-ZIP			, , , <u> </u>	
TITLE		☐ DELETE	4.1 TITLE			☐ Change '	Addition	
NAME			4, 2 NAME	1			}	
STREET ANDRESS	NAME OF THE CONTROL O	1		T ADDRESS			ŀ	
CITY-ST-ZIP	per a transfer of the contract	** *** *** *** *** *** *** *** *** ***	L					
TITLE		☐ DELETE	4.4 CITY-S	1-217		☐ Change	☐ Addition	
	,	C) nerete	5.1 IIILE 5.2 NAME	}			C vagainou	
NAME							1	
STREET ADDRESS	Par J		•	TADDRESS	÷			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP		<u> </u>		
TITLE	Territor of the ACC STATE OF THE SERVICE OF THE SER		6.1 TITLE			Change	Addition	
NAME	MERCANICA GLACIENTE	MATERIAL STATE	6.2 NAME				ĺ	
STREET ADDRESS			6.3 STREE	TADDRESS				
CITY-ST-ZIP	WKS		6.4 CITY-S	T-ZIP			1	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

CR2E034 (11/98)