

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2007 8:00 am
Secretary of State

04-10-2007 90014 038 ****61.25

DOCUMENT # N00000001412					
1. Entity Name WATERSIDE IV AT BAY BEACH CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 4137 BAY BEACH LN OFFICE FT MYERS BEACH, FL 33931			Mailing Address 4137 BAY BEACH LN OFFICE FT MYERS BEACH, FL 33931		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-1123078	
Zip		Country		Zip	
Country		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
DEBOEST, RICHARD II 1415 HENDRY ST FT. MYERS, FL 33902			Name Street Address (P.O. Box Number is Not Acceptable) City		
			FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE P	NAME TAEGE, THOMAS		<input checked="" type="checkbox"/> Delete	TITLE 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 4141 BAY BEACH LANE #494	CITY-ST-ZIP FT MYERS BEACH, FL 33931		STREET ADDRESS 	CITY-ST-ZIP 	
TITLE VP	NAME JUUL, LARRY		<input type="checkbox"/> Delete	TITLE 	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 4141 BAY BEACH LN #455	CITY-ST-ZIP FT MYERS BEACH, FL 33931		STREET ADDRESS 	CITY-ST-ZIP 	
TITLE T	NAME CLEGG, RON		<input type="checkbox"/> Delete	TITLE 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 4141 BAY BEACH LN #446	CITY-ST-ZIP FT MYERS BEACH, FL 33931		STREET ADDRESS 	CITY-ST-ZIP 	
TITLE S	NAME COUNTERMAN, JEFF		<input type="checkbox"/> Delete	TITLE 	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 4141 BAY BEACH LN #422	CITY-ST-ZIP FORT MYERS BEACH, FL 33931		STREET ADDRESS 	CITY-ST-ZIP 	
TITLE D	NAME FAIRBANKS, ALAN		<input type="checkbox"/> Delete	TITLE 	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 4141 BAY BEACH LN #456	CITY-ST-ZIP FORT MYERS BEACH, FL 33931		STREET ADDRESS 	CITY-ST-ZIP 	
TITLE S	NAME FAIRBANKS, ALAN		<input checked="" type="checkbox"/> Delete	TITLE 	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 4141 BAY BEACH LN #456	CITY-ST-ZIP FORT MYERS BEACH, FL 33931		STREET ADDRESS 	CITY-ST-ZIP 	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered					
SIGNATURE _____			3-29-07 237-765-4500		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		

40055407



02212007 Chg-NP CR2E037 (12/06)

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)

City

FL Zip Code

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(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2007

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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