2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2009
Secretary of State

DOCUMENT# N00000004094

Entity Name: WINK WATER MANAGEMENT PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1100 FIFTH AVE SOUTH
STE 210
NAPLES, FL 34102

New Principal Place of Business:

Current Mailing Address:

1100 FIFTH AVE SOUTH
STE 210
NAPLES, FL 34102

New Mailing Address:

FEI Number: 59-3660548 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ITTNER, GARY E
1100 FIFTH AVE SOUTH
SUITE 210
NAPLES, FL 34102 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:	PSTD	( ) Delete
Name:	HALVORSEN, JEFFREY R	
Address:	33 S E 4TH STREET, SUITE 200	
City-St-Zip:	BOCA RATON, FL 33432	
Title:	VD	( ) Delete
Name:	ANZY, JERRY	
Address:	C/O 2125 FIRST ST.	
City-St-Zip:	FORT MYERS, FL 339020790	
Title:	D	( ) Delete
Name:	TACKETT, JACK O	
Address:	C/O 1100 FIFTH AVENUE, SUITE 210	
City-St-Zip:	NAPLES, FL 34102	
Title:	D	( ) Delete
Name:	RUSKAI, JOHN T	
Address:	2328 HANCOCK BRIDGE PARKWAY, STE. 114	
City-St-Zip:	CAPE CORAL, FL 33990	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: JEFFREY T HALVORSEN P 02/26/2009

Electronic Signature of Signing Officer or Director — Date