

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004626

FILED
Mar 24, 2006
Secretary of State

Entity Name: EAST BAY GOLF VILLAS AT WATER VIEW CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

28100 U.S. 19 NORTH, STE 305
CLEARWATER, FL 33761

New Principal Place of Business:

1468 WATERVIEW DRIVE
LARGO, FL 33771

Current Mailing Address:

28100 U.S. 19 NORTH, STE 305
CLEARWATER, FL 33761

New Mailing Address:

7300 PARK STREET
SEMINOLE, FL 33777

FEI Number: 03-0510919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REINHARDT, DEBBIE
28100 U.S. 19 NORTH, STE 305
CLEARWATER, FL 33761 US

Name and Address of New Registered Agent:

REINHARDT, DEBRA
7300 PARK STREET
SEMINOLE, FL 33777 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: DEBRA REINHARDT

03/24/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TOWPIK, BILL
Address: 1440 WATERVIEW DR., #106
City-St-Zip: LARGO, FL 33771

Title: SD () Delete
Name: TOWPIK, JUDIE
Address: 1440 WATERVIEW DR., #106
City-St-Zip: LARGO, FL 33771

Title: VD () Delete
Name: ACOSTA, ARLETTE
Address: 1420 WATERVIEW DR., #104
City-St-Zip: LARGO, FL 33771

Title: D () Delete
Name: WOSTBROCK, BARBARA
Address: 1400 WATERVIEW DR., #102
City-St-Zip: LARGO, FL 33771

Title: D () Delete
Name: KOMMI, KEN
Address: 1420 WATERVIEW DRIVE, #203
City-St-Zip: LARGO, FL 33771

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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM TOWPIK

PD

03/24/2006

Electronic Signature of Signing Officer or Director

Date