2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jul 14, 2008 8:00 am Secretary of State

ANNUAL REPORT 07-14-2008 90094 001 ***245.00 DOCUMENT # N02000008447 THE WATCH II AT WATERLEFE CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 995 FISH HOOK COVE 995 FISH HOOK COVE 66015264 BRADENTON, FL 34212 BRADENTON, FL 34212 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07102008 Chg-NP CR2E037 (12/06) City & State Applied For City & State 4 FFI Number 82-0584372 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TAYLOR, KEN 995 FISH HOOK COVE Street Address (P.O. Box Number is Not Acceptable) BRADENTON, FL 34212 City 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) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by September 12, 2008 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. PD TITLE ☐ Delete TITLE Addition Hughes, Danald **BIGHAM, CHARLES** NAME NAME 9428 Discovery Terrace # 102 9407 DISCOVER TERR #202 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34212 CITY-ST-ZIP Bradendon, FL VD ☐ Delete Tresurer X Addition TITLE Enis, Joseph MILLER, ALAN NAME NAME 9423 Discovery Torace # 202 STREET ADDRESS 9448 DISCOVERY TERR #201 STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34212 CITY-ST-ZIP Addition STD TITLE Delete TITLE NAME SCHROEDER, KIM NAME 9453 Discovery Terrace # 201 Bradenton, Fr 34212 STREET ADDRESS 9454 DISCOVERY TERR #102 STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34212 CITY-ST-ZIP TITLE ☐ Delete TITLE Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ■ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change noitibbA 🔲 NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/10/03

Daytime Phone #