

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000001754

**FILED**  
**Mar 30, 2010**  
**Secretary of State**

**Entity Name:** WEST PRESERVE AT WATERSIDE VILLAGE ASSOCIATION, INC.

**Current Principal Place of Business:**

3380 RUSTICE ROAD  
NOKOMIS, FL 34275

**New Principal Place of Business:**

**Current Mailing Address:**

POB 595  
VENICE, FL 34284

**New Mailing Address:**

**FEI Number:** 65-1180566

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

O'GRADY, CYNTHIA  
3380 RUSTIC RD  
NOKAMIS, FL 34278 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: PD  
Name: ABBOTT, VAUGHAN  
Address: 306 LYN BROOK CIR UNIT 103  
City-St-Zip: VENICE, FL 34292

Title: VPD  
Name: OLSON, VIRGINIA  
Address: 308 LYNBROOK CIR UNIT 101  
City-St-Zip: VENICE, FL 34292

Title: STD  
Name: TASHMAN, VELMA  
Address: 308 LYNBROOK CIR UNIT 102  
City-St-Zip: VENICE, FL 34292

I hereby 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 all other like empowered.

SIGNATURE: VAUGHAN ABBOTT

PD

03/30/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date