

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007339

**FILED**  
**Feb 28, 2010**  
**Secretary of State**

**Entity Name:** WATERWAY PATIO HOMES CONDOMINIUM ASSOCIATION, INC., PHASE II

**Current Principal Place of Business:**

6349 SAGEWOOD LANE  
SEBRING, FL 33876

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 65  
LORIDA, FL 33857

**New Mailing Address:**

**FEI Number:** 56-2400008

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROWER, MARIE A  
6349 SAGEWOOD LANE  
SEBRING, FL 33876 US

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

BROWER, MARIE A MGR  
6349 SAGEWOOD LANE  
SEBRING, FL 33876 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: MARIE A. BROWER, MGR

02/28/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: DAVID, WILLARD  
Address: 203 CLUBHOUSE COURT  
City-St-Zip: SEBRING, FL 33876

Title: D  
Name: BOHANON, LUTHER E  
Address: 220 CLUBHOUSE COURT  
City-St-Zip: SEBRING, FL 33876

Title: PD  
Name: MURCHIE, KIM  
Address: 206 CLUBHOUSE COURT  
City-St-Zip: SEBRING, FL 33876

Title: STD  
Name: YODER, KEITH H  
Address: 1672 EMERSON DR. SE  
City-St-Zip: PALM BAY, FL 32909

Title: VPD  
Name: BURGOYNE, JOSEPH R  
Address: 216 CLUBHOUSE COURT  
City-St-Zip: SEBRING, FL 33876

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: KIM MURCHIE

PD

02/28/2010

Electronic Signature of Signing Officer or Director

Date