

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007650

FILED
Apr 13, 2007
Secretary of State

Entity Name: BALEARES AT WATERCHASE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1418
PALM HARBOR, FL 34682

New Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779

FEI Number: 65-1135306

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
2180 W S.R. 434 STE 5000
LONGWOOD, FL 327795044 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: D () Delete
Name: MUSTARI, RONALD
Address: 290 COCOANUT AVE.
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: ANDREWS, J.S.
Address: 290 COCOANUT AVE.
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: LUCAS, DAN
Address: 290 COCOANUT AVE.
City-St-Zip: SARASOTA, FL 34236

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MESSERSMITH, MARK
Address: 14618 MIRASOL MANOR CT
City-St-Zip: TAMPA, FL 33626

Title: VPD (X) Change () Addition
Name: JENSEN, MARK
Address: 14525 MIRASOL MANOR CT
City-St-Zip: TAMPA, FL 33626

Title: SD (X) Change () Addition
Name: COSTLOW, BARBARA
Address: 14630 MIRASOL MANOR CT
City-St-Zip: TAMPA, FL 33626

Title: TD () Change (X) Addition
Name: HOLLAND, JOHN
Address: 14606 MIRASOL MANOR CT
City-St-Zip: TAMPA, FL 33626

Title: D () Change (X) Addition
Name: HINTERSHIED, JEN
Address: 14516 MIRASOL MANOR CR
City-St-Zip: TAMPA, FL 33626

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: MARK MESSERSMITH

PD

04/13/2007

Electronic Signature of Signing Officer or Director

Date