

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007650

FILED
Mar 31, 2009
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:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779

New Mailing Address:

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
SENTRY MANAGEMENT INC
2180 WEST SR 434 SUITE 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: PD () Delete
Name: MESSERSMITH, MARK
Address: 14618 MIRASOL MANOR CT
City-St-Zip: TAMPA, FL 33626

Title: VPD () Delete
Name: FIEDLER, ERWIN
Address: 14502 MIRASOL MANOR CT
City-St-Zip: TAMPA, FL 33626

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

Title: TD () Delete
Name: MURPHY, TONY
Address: 14629 MIRASOL MANOR CT
City-St-Zip: TAMPA, FL 33626

Title: D () Delete
Name: HINTERSHIED, JAMES
Address: 14516 MIRASOL MANOR CR
City-St-Zip: TAMPA, FL 33626

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: FIEDLER, ERWIN
Address: 14502 MIRASOL MANOR CT
City-St-Zip: TAMPA, FL 33626

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

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

Title: VPD (X) Change () Addition
Name: GREEN, BARRY
Address: 14520 MIRASOL MANOR CR
City-St-Zip: TAMPA, FL 33626

I hereby certify that the information supplied with this filing does not qualify 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

03/31/2009

Electronic Signature of Signing Officer or Director

Date