

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 02, 2011
Secretary of State

DOCUMENT# N03000008961

Entity Name: WATERCREST CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**6390 WATERCREST WAY
LAKEWOOD RANCH, FL 34202**New Principal Place of Business:****Current Mailing Address:**C/O BETH CALLANS MANAGEMENT CORP
595 BAY ISLES ROAD SUITE 200
LONGBOAT KEY, FL 34228**New Mailing Address:**C/O ARGUS MANAGEMENT INC
2477 STICKNEY POINT ROAD SUITE 118
SARASOTA, FL 34231**FEI Number:** 20-1806031**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BETH CALLANS MANAGEMENT CORPORATION
595 BAY ISLES ROAD
SUITE 200
LONGBOAT KEY, FL 34228 US**Name and Address of New Registered Agent:**ARGUS MANAGEMENT, INC
2477 STICKNEY POINT RD
SUITE 118A
SARASOTA, FL 34231 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: WALT HAMMERLING

09/02/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: TWIGGS, JERRY
Address: 6482 WATERCREST WAY #302
City-St-Zip: LAKEWOOD RANCH, FL 34202

Title: D
Name: MICKELSON, SANDRA
Address: 6474 WATERCREST WAY UNIT 404
City-St-Zip: LAKEWOOD RANCH, FL 34202

Title: D
Name: JACKSON, LORNE
Address: 6440 WATERCREST WAY #302
City-St-Zip: LAKEWOOD RANCH, FL 34202

Title: T
Name: GRANT, KATHLEEN
Address: 6340 WATERCREST WAY UNIT #302
City-St-Zip: LAKEWOOD RANCH, FL 34202

Title: SEC
Name: CONNOLLY, ROBERT JR
Address: 6474 WATERCREST WAY #401
City-St-Zip: LAKEWOOD RANCH, FL 34202

Title: VP
Name: FLORENSA, JUAN
Address: 6360 WATERCREST WAY #203
City-St-Zip: LAKEWOOD RANCH, FL 34202

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: JERRY TWIGGS

P

09/02/2011

Electronic Signature of Signing Officer or Director

Date