2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004189

Entity Name: WATER GARDENS ASSOCIATION, INC.

FILED May 20, 2008 Secretary of State

Current Princip	al Place of Business:	New Princip	al Place of Business

1625 NORTH COMMERCE PARKWAY SUITE 315 1349 AQUI ESTA DRIVE WESTON, FL 33326 PUNTA GORDA, FL 33950

Current Mailing Address: New Mailing Address:

1625 NORTH COMMERCE PARKWAY SUITE 315 6025 TAYLOR RD

WESTON, FL 33326 #2 PUNTA GORDA. FL 33950

FEI Number: 20-4186242 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

LOMBARDI, VINCENZO STAR HOSPITALITY MANAGEMENT, INC. 3322 PURPLE MARTIN DR. 6025 TAYLOR RD

UNIT 137 #2

PUNTA GORDA, FL 33950 US PUNTA GORDA, FL 33950 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: H. SHERIDAN DANKO 05/20/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

Name: LOMBARDI, VINCENZO Name: REY, JULIO
Address: 3906 LACOSTA ISLAND COURT Address: 7000 ISLAND BLVD, VILLA MARINA 1704

City-St-Zip: PUNTA GORDA, FL 33950 City-St-Zip: AVENTURA, FL 33160

Title: SD () Delete Title: () Change () Addition

Name: ALBACETE, ALFONSO Name:

Address: 1625 NORTH COMMERCE PARKWAY SUITE 315 Address: City-St-Zip: WESTON, FL 33326 City-St-Zip:

 Name:
 MARTINEZ, CIRO
 Name:
 PRADA, FRANCISCO

 Address:
 1625 NORTH COMMERCE PARKWAY SUITE 315
 Address:
 500 SE MIZNER BLVD. #507

 City-St-Zip:
 WESTON, FL 33326
 City-St-Zip:
 BOCA RATON, FL 33432

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: JULIO REY PD 05/20/2008

Electronic Signature of Signing Officer or Director

Date