## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000005413

FILED Mar 08, 2007 Secretary of State

Entity Name: WATER'S EDGE AT DEERFIELD CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

700 CYPRESS CLUB WAY DEERFIELD BEACH, FL 33064

Current Mailing Address: New Mailing Address:

700 CYPRESS CLUB WAY DEERFIELD BEACH, FL 33064

FEI Number: 56-2524503 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

PHILIPS, DANIEL J
700 CYPRESS CLUB WAY
DEERFIELD BEACH, FL 33064 US
BACKER, KEITH F
THE ARBOR, SUITE 420
400 SOUTH DIXIE HIGHWAY
BOCA RATON, FL 33432 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.

III the State of Florida.

SIGNATURE: KEITH F. BACKER 03/08/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:PD( ) DeleteTitle:PD(X) Change ( ) AdditionName:PHILIPS, DANIEL JName:HENSON, ELAINEAddress:700 CYPRESS CLUB WAYAddress:700 CYPRESS CLUB WAYCity-St-Zip:DEERFIELD BEACH, FL 33064City-St-Zip:DEERFIELD BEACH, FL 33064

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

Name: BOO, DONALD Name: PHILIPS, DANIEL

Address: 700 CYPRESS CLUB WAY
City-St-Zip: DEERFIELD BEACH, FL 33064
Address: 700 CYPRESS CLUB WAY
City-St-Zip: DEERFIELD BEACH, FL 33064
City-St-Zip: DEERFIELD BEACH, FL 33064

Title: STD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BRATU, GRACE
 Name:

 Address:
 700 CYPRESS CLUB WAY
 Address:

 City-St-Zip:
 DEERFIELD BEACH, FL 33064
 City-St-Zip:

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

Name:Name:LUNDGREN, ERICAddress:Address:700 CYPRESS CLUB WAYCity-St-Zip:City-St-Zip:DEERFIELD BEACH, FL 33064

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: ELAINE HENSON PD 03/08/2007