2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 07, 2006
Secretary of State

DOCUMENT# N05000008300

Entity Name: WATERSIDE II HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

255 EAST PACES FERRY RD., STE. 450
ATLANTA, GA 30305

New Principal Place of Business:

Current Mailing Address:

255 EAST PACES FERRY RD., STE. 450
ATLANTA, GA 30305

New Mailing Address:

FEI Number: 20-3311226 **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:

BURKE, M. TODD ESQ.
215 GRAND BLVD., STE. 101
BURKE, BLUE, HUTCHISON AND WALTERS, P.A.
SANDESTIN, FL 32550 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: DP ( ) Delete
Name: TUCKER, JEFFREY S.
Address: 455 OLD CLUB RD.
City-St-Zip: MACON, GA 31210

Title: DVS ( ) Delete
Name: HAYES, HOWELL
Address: 4470 CHAMBERLEE DUNWOODY RD.
City-St-Zip: ATLANTA, GA 30338

Title: DT ( ) Delete
Name: RESSER, RONALD
Address: 4470 CHAMBERLEE DUNWOODY RD.
City-St-Zip: ATLANTA, GA 30338

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JEFFREY TUCKER DP 08/07/2006

Electronic Signature of Signing Officer or Director — Date