2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011289

FILED Apr 26, 2007 Secretary of State

Entity Name: WATROUS PLACE TOWNHOUSES HOMEOWNERS' ASSOCIATION, INC.

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

821 S. EDISON AVE. 1111 S MOODY AVE TAMPA, FL 33606 TAMPA, FL 33629 US

Current Mailing Address: New Mailing Address:

821 S. EDISON AVE. 1111 S MOODY AVE. TAMPA, FL 33606 TAMPA, FL 33629 US

FEI Number: 16-1772425 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:

HUDOBA, STEPHEN M.

101 E. KENNEDY BLVD., STE. 3700

TAMPA, FL 33602 US

GREENE, MICHAEL D D

1111 S MOODY AVE.

TAMPA, FL 33629 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: MICHAEL D GREENE 04/26/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: PETTY, HARVEY N. Name: GREENE, MICHAEL D

 Name
 FETTY, TRIVET N.
 Name
 SKELINE, MICHAEL B

 Address:
 821 S. EDISON AVE.
 Address:
 1111 S MOODY AVE

 City-St-Zip:
 TAMPA, FL 33606
 City-St-Zip:
 TAMPA, FL 33629 US

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

 Name:
 AVERY, JEFF
 Name:

 Address:
 821 S. EDISON AVE.
 Address:

 City-St-Zip:
 TAMPA, FL 33606
 City-St-Zip:

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

 Name:
 PETTY, SHIRLEY
 Name:

 Address:
 821 S. EDISON AVE.
 Address:

 City-St-Zip:
 TAMPA, FL 33606
 City-St-Zip:

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: MICHAEL GREENE D 04/26/2007