2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# N06000002318

Entity Name: WATROUS PLANTATION MASTER ASSOCIATION, INC.

Current Principal Place of Business:

16266 SAN CARLOS BOULEVARD, SUITE 2
FORT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

16266 SAN CARLOS BOULEVARD, SUITE 2
FORT MYERS, FL 33908

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

R&A AGENTS, INC.
ATTN STEVEN W. HUBBARD
2320 FIRST STREET, SUITE 1000
FORT MYERS, FL 339012904 US

Name and Address of New Registered Agent:

GTB PROPERTIES LLC
16266-1 SAN CARLOS BLVD
FORT MYERS, FL 33908 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: CHUCK CLAYPOOL 04/30/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: CLAYPOOL, CHUCK
Address: 16266 SAN CARLOS BOULEVARD, SUITE 2
City-St-Zip: FORT MYERS, FL 33908

Title: DVP ( ) Delete
Name: CLAYPOOL, CHRIS
Address: 16266 SAN CARLOS BOULEVARD, SUITE 2
City-St-Zip: FORT MYERS, FL 33908

Title: DST ( ) Delete
Name: PAYNE, CARRIE
Address: 16266 SAN CARLOS BOULEVARD, SUITE 2
City-St-Zip: FORT MYERS, FL 33908

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 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: CHUCK CLAYPOOL DP 04/30/2007
Electronic Signature of Signing Officer or Director Date