

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED

08 FEB 25 PM 1:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



10092007 REIN-NP CR2E099 (1/07)

DOCUMENT # N06000004485 1. Entity Name WATERWAY CLUB COMMON AREA INC.					
Principal Place of Business 888 N. FEDERAL HIGHWAY LANTANA, FL 33462			Mailing Address 888 N. FEDERAL HIGHWAY LANTANA, FL 33462		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DREW, JOHN 100 WATERWAY DRIVE SOUTH #101 LANTANA, FL 33462				7. Name and Address of New Registered Agent Name <u>RUTH M. ACTESON</u> Street Address (P.O. Box Number is Not Acceptable) <u>100 WATERWAY DR. So #207</u> <u>LANTANA FL 33462</u> City <u>FL</u> Zip Code <u>33462</u>	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: <u>Ruth M. Acteson</u> <u>RUTH M. ACTESON</u> <u>2/15/08</u> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$236.25 After January 1, 2008, Fee will be \$297.50				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DREW, JOHN 888 N. FEDERAL HIGHWAY LANTANA, FL 33462	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	BOB LAMB 100 WATERWAY DR. So #206 LANTANA FL 33462	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V COSARO, BETTY 200 WATERWAY DR. #105 LANTANA, FL 33462	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	600118742316 02/25/08--01034--017 **297.50	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GUTRIAJ, BARBARA 300 WATERWAY DR. 104 LANTANA, FL 33462	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KEN WHITE 100 WATERWAY DR. So #102 LANTANA FL 33462	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ACTESON, RUTH 888 N. FEDERAL HIGHWAY LANTANA, FL 33462	<input type="checkbox"/> Delete	REINSTATEMENT RH 1-08		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11, if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Ruth M. Acteson</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date <u>2/15/08</u> Daytime Phone # <u>561-582-4614</u>	