2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Jun 17, 2008 8:00 am Secretary of State 04-24-2008 90098 047 ****61.25

DOCUMENT # N0600005707 1. Entity Name CLUBSIDE AT WILD HERON CONDOMINIUM ASSOCIATION, INC.								
	Mailing Address JENETIAN COURT NG 4 S. FL 34109 Cipal Place of Business No PD. Box # 3. Mailing Address Suite, Apt. #, etc. State MAG Lty Bach 71 Country Suite, Apt. #, etc. South Aman Back Suite, Apt. #, etc. South Aman Back Country Suite, Apt. #, etc.				660143			
2. Principal P II IO Suite, Apt.	DSOCT Romend	+ 40 Box 429	71			## ### ### ### ### ### ### ### ### ###	2E037 (12/06)	
City & Stat		MIRAMAR A	Beach	7/	l. FEI Number 20-495258	1		oplied For of Applicable
Zip 32	413	32550	Country *		. Certificate of Sta	tus Desired ese of New Registr	Fee Hequire	
	, LISA H ESQ. I AVENUE SOUTH	Name)	PASTI BY P. S	91 Map Benjambera Benga	nties Hs	PKWY	Manapena	
	named entity submits this statement to tions of registered agent.		gistered office or			he State of Florida.	am familier with,	and accept
	Filing Fee is \$61,25 Due by May 1, 2008	Election Campa Trust Fund Cor	tribution.	Lì Â	5.00 May Be ided to Fees	Florida D	heck payable t epartment of S	tate
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIE D BATEMAN, ARTHUR L 2245 VENETIAN COURT, BLDG NAPLES, FL 34100	☐ Delets	111. IITLE HAME STREET ADDRESS CITY-SI-ZIP	poba	DITIONS/CHANGE DX 12.169 DKCS, F1	<u>s 10 Officers an</u>	D DIRECTORS IN	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DERSCH, JOYCE 2245 VENISTIAN COURT, BLDG NAPLES, FL 34109	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		0x 1216°C 0x 5FL		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DULANEY, JO ANN 2245 VENETIAN COURT, BLDG NAPLES, FL 34109	□ Dolete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	•	XX 1216 XES . FI	_	(1) Change	Addition
INTLE - NAME STREET ADDRESS CITY-S1-2IP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE HAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
12. I hereby indicated of the co	certify that the information supplied with on this report or supplemental report is	this filing does not qualify for the true and accurate and that my	se exemptions co	ontained in	Chapter 119, Flori	da Statutes, I furthe made under oath: I	certify that the in	formation