

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 18, 2011
Secretary of State

Entity Name: WATERS EDGE OF DUNEDIN HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

TRI COUNTY DEVELOPMENT, INC.
9400 RIVER CROSSING BLVD STE 102
NEW PORT RICHEY, FL 34655

New Principal Place of Business:

Current Mailing Address:

TRI COUNTY DEVELOPMENT, INC.
9400 RIVER CROSSING BLVD STE 102
NEW PORT RICHEY, FL 34655

New Mailing Address:

FEI Number: 94-3474306

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRI COUNTY DEVELOPMENT, INC.
9400 RIVER CROSSING BLVD., SUITE 102
NEW PORT RICHEY, FL 34655 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: PD
Name: BRINSON, DON
Address: 9400 RIVER CROSSING BLVD., SUITE 102
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: VPD
Name: DEEB, ALEX R
Address: 9400 RIVER CROSSING BLVD., SUITE 102
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: SD
Name: DEEB, RICHARD J II
Address: 9400 RIVER CROSSING BLVD., SUITE 102
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: T
Name: DEEB, ADAM R
Address: 9400 RIVER CROSSING BLVD., SUITE 102
City-St-Zip: NEW PORT RICHEY, FL 34655

I hereby 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 all other like empowered.

SIGNATURE: ALEX R. DEEB

VP

02/18/2011

Electronic Signature of Signing Officer or Director

Date