2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008
Secretary of State

DOCUMENT# N06000011696

Entity Name: THE WET SLIPS AT BELLAGIO HARBOR VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

14001 BELLAGIO WAY
OSPREY, FL 34229

New Principal Place of Business:

Current Mailing Address:

14001 BELLAGIO WAY
OSPREY, FL 34229

New Mailing Address:

FEI Number: 20-8622962 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMS, KAREN
14001 BELLAGIO WAY
OSPREY, FL 34229 US

Name and Address of New Registered Agent:

ORZECHOWSKI, JOSEPH
419 HUNTRIDGE DR.
VENICE, FL 34292 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: JOE ORZECHOWSKI 04/14/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DIR ( ) Delete
Name: ORZECHOWSKI, JOSEPH
Address: 419 HUNTRIDGE DRIVE
City-St-Zip: VENICE, FL 34292

Title: DIR ( ) Delete
Name: CANTON, LEO
Address: 14001 BELLAGIO WAY
City-St-Zip: OSPREY, FL 34229

Title: DIR ( ) Delete
Name: DOERNER, PETER
Address: 2009 MICANOPY TRAIL
City-St-Zip: NOKOMIS, FL 34275

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: ORZECHOWSKI, JOSEPH
Address: 419 HUNTRIDGE DRIVE
City-St-Zip: VENICE, FL 34292

Title: TRES (X) Change ( ) Addition
Name: CANTON, LEO
Address: 1242 SIESTA BAYSIDE DR
City-St-Zip: SARASOTA, FL 34242

Title: SEC (X) Change ( ) Addition
Name: DOERNER, PETER
Address: 2009 MICANOPY TRAIL
City-St-Zip: NOKOMIS, FL 34275

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: JOE ORZECHOWSKI PRES 04/14/2008
Electronic Signature of Signing Officer or Director Date