2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004539

FILED Jan 05, 2009 Secretary of State

Entity Name: WEATHERBEE VILLAS CONDOMINIUM ASSOCIATION INC

Current Principal Place of Business:		New Principal Place of Business:		
109 CAS T PIERC	SIA DR E, FL 34982			
Current Mailing Address:		New Mailing Address:		
109 CAS T PIERC	SIA DR E, FL 34982			
El Number	: 45-0567352	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:		
109 CAS	ARRY L SR SIA DR			
T PIERC	E, FL 34982	US		
he above	E, FL 34982		ourpose of changing its registere	ed office or registered agent, or both,
he above	E, FL 34982 e named entity s e of Florida. RE:	ubmits this statement for the p		
The above in the State	E, FL 34982 named entity se of Florida. RE: Electroni	ubmits this statement for the local control of the local control of Registered Agriculture	ent	Date
The above in the State	E, FL 34982 e named entity s e of Florida. RE:	ubmits this statement for the local control of the local control of Registered Agriculture	ent	
The above in the State	E, FL 34982 e named entity se of Florida. RE: Electroni S AND DIRECT	ubmits this statement for the place of Registered Agronas: Delete L SR R	ent	Date
The above in the State SIGNATUI DFFICER ittle: lame: ddress:	E, FL 34982 e named entity s e of Florida. RE: Electroni S AND DIRECT PTD () QUICK, LARRY 6109 CASSIA DI FT PIERCE, FL	ubmits this statement for the place of Registered Agroups: Delete L SR R 34982 Delete L JR R	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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: LARRY L. QUICK, SR. PTD 01/05/2009