

05-15-2008 90020012 ***61.25
N07000006385

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

08 MAY 23 PM 1:48

4010 - SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # N07000006385			
1. Entity Name THE LAGOON AT TIDEWATER PRESERVE MASTER CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 24301 WALDEN CENTER DRIVE, SUITE 300 BOINITA SPRINGS, FL 34134		Mailing Address 24301 WALDEN CENTER DRIVE, SUITE 300 BOINITA SPRINGS, FL 34134	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 8409 N. Military Trl. Ste 123 Suite, Apt. #, etc. c/o Cherry Edger - Smith, PA City & State Palm Beach Gardens, FL	
Suite, Apt. #, etc.		City & State	
City & State		4. FEI Number 41-2254305	
Zip	Country	Zip	Country
33410	USA	33410	USA
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		CR2E037 (12/06)	
6. Name and Address of Current Registered Agent HASTINGS, VIVIAN N 24301 WALDEN CENTER DRIVE, SUITE 300 BOINITA SPRINGS, FL 34134		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BARBER, RICHARD 2020 CLUBHOUSE DRIVE SUN CITY CENTER, FL 33573 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BOUG EGLY 4700 TIDEWATER PRESERVE BLVD. BRADENTON, FL 34208 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD AMAN, ROGER 24301 WALDEN CENTER DRIVE, SUITE 300 BOINITA SPRINGS, FL 34134 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD FITT, ROXANA 24301 WALDEN CENTER DRIVE, SUITE 300 BOINITA SPRINGS, FL 34134 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD STEVE CHESANEK 4700 TIDEWATER PRESERVE BLVD BRADENTON, FL 34208 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME 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 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>Doug Egly</u>		<u>3/28/08</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	