

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14075

FILED
Apr 28, 2006
Secretary of State

Entity Name: SPINNAKER BAY AT THE WATERWAYS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O USA SERVICES
6915 TAFT STREET
HOLLYWOOD, FL 33020 US

New Principal Place of Business:

Current Mailing Address:

C/O USA SERVICES
6915 TAFT STREET
HOLLYWOOD, FL 33020 US

New Mailing Address:

FEI Number: 59-2466564

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROGEL, DAVID ESQ.
121 ALHAMBRA PLAZA
STE 1000 (10TH FLOOR)
CORAL GABLES, FL 33126 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: D () Delete
Name: BOTTICELLI, FRANCISCO
Address: 21075 NE 34TH AVE. #304
City-St-Zip: N MIAMI, FL 33180

Title: SD () Delete
Name: KWITNEY, IRENE
Address: 21085 NE 34 AVE #101
City-St-Zip: N MIAMI BEACH, FL 33180

Title: TD () Delete
Name: BARKOWITZ, HAROLD
Address: 21085 NE 34TH AVE. #106
City-St-Zip: N MIAMI BEACH, FL 33180

Title: PD () Delete
Name: PARHAM, PATRICK
Address: 21085 NE 34TH AVE., #102
City-St-Zip: N MIAMI BEACH, FL 33180

Title: SD () Delete
Name: KLEIN, PAUL
Address: 21075 NE 34 AVE
City-St-Zip: N MIAMI, FL 33180

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: SHORKEY, ROBERT
Address: 21085 NE 34TH AVE, UNIT 105
City-St-Zip: N MIAMI BEACH, FL 33180

I hereby certify that the information supplied with this filing does not qualify for the 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: PATRICK PARHAM

P

04/28/2006

Electronic Signature of Signing Officer or Director

_____ Date