2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N16080

SIGNATURE:

1. Entity Name



FILED May 01, 2006 8:00 am Secretary of State 05-01-2006 90460 018 ****61.25

INC.										
			ddress 9th Terrace Nuderdale, fl. 33312-2516							
2. Principal Place of Business 3. Ma		3. Mailing	iling Address				017H			
Suite, Apt. #, etc. S		Suite	uite, Apt. #, etc.			04282006 _{CI}	hg-NP CF	R2E037 (4/06	i)	
City & State C		City &	ity & State			4. FEI Number 65-000211	4		Applied For Not Applicable	
Zip	Country.	Zip	Zip Cour			5. Certificate of Status Desired				
	6. Name and Address of Current	Registered	Agent			7. Name and Add	iress of New Registe	red Agent		
DAHLKE GREG				Name	Name					
DAHLKE, GREG 527 SW 9 TERRACE FT. LAUDERDALE, FL 33312				Street	Street Address (P.O. Box Number is Not Acceptable)					
				City			·	FL Zip C	ode	
8. The above	named entity submits this statement fo	r the purpos	e of changing its re	egistered office	or register	ed agent, or both, in	the State of Florida.	l am familiar wi	th, and accept	
the obligati	ions of registered agent.									
SIGNATURE .										
	Signature, typed or printed name of registered agent	and title if applica	uble. (NOTE: F	Registered Agent sign	eture required	when reinstating)	0	MTE		
Filing Fee is \$61.25 9. Due by May 1, 2006			9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Make check payable to Added to Fees Florida Department of State				
	220 J maj 1, 2000					. 10000 10 1 000		*		
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2006 NOT-FOR-PROFIT CORPORATION

SIGNATURE: _

ATTACHMENT ANNUAL REPORT DOCUMENT # N16080 WATERFRONT PROPERTY OWNERS' ASSOCIATION. INC. 60032083 Principal Place of Business Mailing Address 527 SW 9TH TERRACE 527 SW 9TH TERRACE FORT LAUDERDALE, FL 33312-2516 FORT LAUDERDALE, FL 33312-2516 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04282006 Chg-NP CR2E037 (4/06) City & State City & State 4. FEI Number 65-0002114 Applied For Not Applicable Zio Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DAHLKE, GREG Street Address (P.O. Box Number is Not Acceptable) **527 SW 9 TERRACE** FT. LAUDERDALE, FL 33312 City 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 aignature required when reinstating) DATE 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution, Florida Department of State Due by May 1, 2006 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delete TITLE ☐ Change Addition Just Jarne JUST, JAYNE NAME NAME Terrace STREET ADDRESS 1471 SW 18 AVENUE STREET ADORESS 31112 CITY-ST-ZIP FORT LAUDERDALE, FL 33312 CITY-ST-7IP TITLE ☐ Delete DILE Addition Change WILLARD, CHAS NAME 425 SW 14 AVE STREET ADDRESS STREET ADDRESS olas CITY-ST-ZIP FT. LAUDERDALE, FL CITY-ST-ZIP 33312 TITLE ☐ Delete TITLE Change ☐ Addition DAHLKE, GREG NAME NAME STREET ADDRESS 527 SW 9TH TERR STREET ADORESS CITY-ST-7P FT. LAUDERDALE, FL CITY-ST-ZIP TITLE DVP Delete TITLE ☐ Change ☐ Addition JUST, JAYNE NAME NAME 1471 SW 18 AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE, FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition JASINSKI, BOB NAME NAME STREET ADDRESS 1721 W LAS OLAS BLVD STREET ADDRESS CITY-ST-7IP FORT LAUDERDALE, FL 33312 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition MADDEN, RUBY NAME NAME 2856 NF 26 PL STREET ADORESS STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE, FL CITY-ST-ZIP 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.

Page ZofZ

Daytime Phone #

ATTACHMENT

Waterfront Property Owners Association, Inc. 527 SW 9th Terrace

Fort Lauderdale, FL 33312-2516

April 27, 2006

Florida Department of State Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

RE: 2006 Annual Report

The attached two pages contain the names, addresses and title designations for all of our eight officers and directors as listed in Block 11 of both pages.

If you could please list them in the order written, it would be easier for us to file next year.

Thank you for your attention. If you have any questions, I may be reached at (954) 523-1121.

Greg Dahlke - President

Waterfront Property Owners Association, Inc.