## 2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## DOCUMENT # N20714

1. Entity Name



WATERSEDGE AT THE LAKES DELRAY CONDOMINIUM C ASSOCIATION, INC. Principal Place of Business Mailing Address PRIME MANAGMENT GROUP 6300 PARK OF COMMERCE GROUP, INC. BOCA RATON FL 33487 66000660 PRIME MANAGMENT GROUP 6300 PARK OF COMMERCE GROUP, INC. BOCA RATON FL 33487 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 59-2827726 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LEINER, KEN Street Address (P.O. Box Number is Not Acceptable) 15074 WATNEY ROA D #203 **DELRAY BEACH FL 33484** 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. PD ☐ Delete TITLE TITLE ☐ Change ☐ Addition LEINER, KEN NAME NAME STREET ADDRESS 15074 WITNEY RD #203 STREET ADDRESS **DELRAY BEACH FL 33484** CITY-ST-ZIP CITY-ST-ZIP VPD ☐ Delete TITLE Change Change ☐ Addition MOSS, RITA NAME 15074 WITNEY RD #109 STREET ADDRESS STREET ADDRESS DELRAY BEACH FL 33484 CITY-ST-ZIP CITY-ST-ZIP SD TITLE **⊠** Delete TITLE SERBETAKY SHAPIRO, ARHCIE NAME NAME STREET ADDRESS 15074 WITNEY RD #309 STREET ADDRESS City-St-ZiP DELRAY BEACH FL 33484 CITY-ST-ZIF TITLE ☐ Delete TITLE ☐ Change ☐ Addition COHEN, MARVIN NAME NAME STREET ADDRESS 15074 WITNEY RD #201 STREET ADDRESS CITY-ST-7IP **DELRAY BEACH FL 33484** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition WILLIAMS, ANN NAME NAME 15074 WITNEY RD #101 STREET ADDRESS STREET ADDRESS **DELRAY BEACH FL 33484** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: KERWOOTH LINEN

STREET ADORESS

CITY-ST-ZIP

FILED

Apr 03, 2006 8:00 am Secretary of State

03-10-2006 90013 045 \*\*\*\*61.25