2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 18, 2008 8:00 am Secretary of State

04-18-2008 90033 039 ****61.25

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DOCUM	IENT 7	# N29045
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1. Entity Name

WATERSIDE AT ADMIRAL'S COVE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 200 ADMIRAL'S COVE BLVD. JUPITER, FL 33477 Mailing Address

200 ADMIRAL'S COVE BLVD.

JUPITER, FL 33477

2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 3. Mailing Address Suite, Apt. #, etc. City & State		1 100/101 610 10610 10010 60010 60010 60010 60010 60010 60010 60010 60010 60010 60010 60010 60010 60010 60010					
		Suite, Apt. #, etc.			04142008 Chg-NP CR2E037 (12/06) 4. FEI Number Applied For 65-0122399 Not Applicable		
		City & State					
Zip	Country	Zip	Country	5. Certificate of Status De		8.75 Additional se Required	
	6. Name and Address of Curren	t Registered Agent		7. Name and Address of New Registered Agent			
			Name				
ADMIRALS COVE COMMUNITY SVCS 200 ADMIRALS COVE BLVD JUPITER, FL 33477 (2)			Street Addres	Street Address (P.O. Box Number is Not Acceptable)			
					FL	Zip Code	
•	Signature, typed or printed name of registered age Filling Fee is \$61.25 Due by May 1, 2008		E: Registered Agent signature requestricts and s	\$5.00 May Be Added to Fees	Make check		
10.	OFFICERS AND D	DIRECTORS	11.	ADDITIONS/CHANGES TO	OFFICERS AND DIRE	CTORS IN 10	
TITLE NAME STREET ADORESS CITY-ST-ZIP	SD GANZ, KENNETH S 154 EAGLE DR JUPITER, FL 33477	IX Delete	TITLE ST	odrea Saks Fagle Dr.		Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BEUTNER, ROGER E. 216 EAGLE DRIVE JUPITER, FL 33477	□ Đelete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	¥ 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-1VP BRESSAUER, DAVID M 256 EAGLE DRIVE JUPITER, FL 33477	X Delete	NAME STREET ADDRESS 25	P. Unicl Kantor 52 Eagle Dr.	·	Change Addition	

12. I hereby certify that the information supplied with this fling 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-land accurate and that my signature shall have the same legal effect as if made under ceth; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as remised by Chapter 617, Florida Statutes; and that my pame appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

TITLE

NAME

TITLE

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STREET ADDRESS

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CITY-ST-21P

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SIGNATURE:

TITLE

NAME

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NAME STREET ADDRESS

STREET ADDRESS

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CITY-ST-ZIP

LOU, GUTH

210 EAGLE DR.

JUPITER, FL 33477

KANTOR, DANIEL

JUPITER, FL 33477

252 EAGLE DR.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Delete

☐ Delete

□ Delete

04/15/2008

ted Brickman

262 60916 Dr

David Broslaver 256 Eagle Dr

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