2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29416

FILED Jan 30, 2009 Secretary of State

Entity Name: WATERSIDE VILLAGE OF PALM BEACH, CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 132 WATERSIDE DR. HYPOLUXO, FL 33462 US **Current Mailing Address: New Mailing Address:** 132 WATERSIDE DR. HYPOLUXO, FL 33462 US FEI Number: 65-0118157 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HARVEY, DANIEL 132 WATERSIDE DRIVE HYPOLUXO, FL 33462 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MONGRAIN, ANDRE Name: Name: 721 WATERSIDE DRIVE Address: Address: City-St-Zip: HYPOLUXO, FL 33462 City-St-Zip: Title: Title: (X) Change () Addition () Delete COMTOIS, CLAUDE Name: COMTOIS, CLAUDE Name: Address: 432 WATERSIDE DRIVE Address: 432 WATERSIDE DRIVE City-St-Zip: HYPOLUXO, FL 33462 City-St-Zip: HYPOLUXO, FL 33462 Title: () Delete Title: (X) Change () Addition BERGERON, ANDRE BERGERON, ANDRE Name: Name: 376 WATERSIDE DRIVE Address: 376 WATERSIDE DRIVE Address: City-St-Zip: HYPOLUXO, FL 33462 City-St-Zip: HYPOLUXO, FL 33462 () Delete Title: Title: () Change () Addition Name: BELANGER, GABY Name: Address: 553 WATERSIDE DRIVE Address: City-St-Zip: HYPOLUXO, FL 33462 City-St-Zip: Title: () Delete Title: (X) Change () Addition VAN, ROBERT PELLERIN, ANDRE Name: Name: 155 WATERSIDE DRIVE 620 WATERSIDE DRIVE Address: Address: City-St-Zip: HYPOLUXO, FL 33462 City-St-Zip: HYPOLUXO, FL 33462 Title: () Delete Title: (X) Change () Addition ROCHON, MARC PETRESCU, MARIAN Name: Name: Address: 434 WATERSIDE DRIVE Address: 203 WATERSIDE DRIVE HYPOLUXO, FL 33462 HYPOLUXO, FL 33462 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CLAUDE CONTOIS S 01/30/2009