

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

DOCUMENT # **N36113** (1)

95 APR 27 AM 10:02

1. Corporation Name

**WATERSEDGE AT THE LAKES OF DELRAY CONDOMINIUM I  
ASSOCIATION, INC.**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address  
**C/O SPECIALTY MGMT. COMP** **C/O SPECIALTY MANAGEMENT COMP**  
**220 CONGRESS PARK DR., STE 200** **220 CONGRESS PARK DR. STE. 200**  
**DELRAY BCH FL 33445** **DELRAY BEACH FL 33445**  
**US** **US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **01/10/1990** 3a. Date of Last Report **05/01/1994**  
4. FEI Number **65-0307167** Applied For  Not Applicable

2. Principal Place of Business 2a. Mailing Address  
**21 Prime Management Group** **26 1051 South Rogers Cir.**  
Suite, Apt. #, etc. Suite, Apt. #, etc.

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

22 City & State 27 City & State  
**23 Boca Raton, Florida** **28 Boca Raton, Florida**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

24 Zip 25 Country 29 Zip 30 Country  
**24 33487** **25** **29 33487** **30**

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status  **\$68.75 Supplemental Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent  
**ST. JOHN & KING & DICKER**  
**500 AUSTRALIAN AVE., SOUTH**  
**#600**  
**W PALM BEACH FL 33401**

10. Name and Address of New Registered Agent  
81 Name **Myron Swatt**  
82 Street Address (P.O. Box Number is Not Acceptable) **Prime Management Group, Inc.**  
83 **1051 South Rogers Circle**  
84 City **Boca Raton** 85 Zip Code **FL 33487**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* DATE: **4/13/95**  
(NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS

TITLE	<b>PD</b>
NAME	<b>COMET, IRVING</b>
STREET ADDRESS	<b>15324 LAKES OF DELRAY BLVD., STE. 309</b>
CITY - ST - ZIP	<b>DELRAY BCH. FL</b>
TITLE	<b>VD</b>
NAME	<b>BREWIS, AL</b>
STREET ADDRESS	<b>15324 LAKES OF DELRAY BLVD., STE 310</b>
CITY - ST - ZIP	<b>DELRAY BCH. FL</b>
TITLE	<b>VD</b>
NAME	<b>ROSS, MICHAEL</b>
STREET ADDRESS	<b>15324 LAKES OF DELRAY BLVD., STE. 313</b>
CITY - ST - ZIP	<b>DELRAY BEACH FL</b>
TITLE	<b>TD</b>
NAME	<b>BERNSTEIN, SIDNEY</b>
STREET ADDRESS	<b>15324 LAKES OF DELRAY BLVD., STE. 213</b>
CITY - ST - ZIP	<b>DELRAY BEACH FL</b>
TITLE	<b>SD</b>
NAME	<b>PERESMIK, MILTON</b>
STREET ADDRESS	<b>15324 LAKES OF DELRAY BLVD., #305</b>
CITY - ST - ZIP	<b>DELRAY BEACH FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<b>PD</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>Brewis, Al</b>
1.3 STREET ADDRESS	<b>15324 Lakes of Delray Blvd. #310</b>
1.4 CITY - ST - ZIP	<b>Delray Beach, Florida 33487</b>
2.1 TITLE	<b>VD</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	<b>Raff, Melvin</b>
2.3 STREET ADDRESS	<b>15324 Lakes of Delray Blvd. #304</b>
2.4 CITY - ST - ZIP	<b>Delray Beach, Florida 33484</b>
3.1 TITLE	<b>VD</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	<b>Peresmik, Milton</b>
3.3 STREET ADDRESS	<b>15324 Lakes of Delray Blvd. #305</b>
3.4 CITY - ST - ZIP	<b>Delray Beach, Florida 33484</b>
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<b>SD</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	<b>Kazer, Irving</b>
5.3 STREET ADDRESS	<b>15324 Lakes of Delray Blvd. #202</b>
5.4 CITY - ST - ZIP	<b>Delray Beach, Florida 33484</b>
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 of this report or in an attachment with an address.

SIGNATURE: *[Signature]* DATE: **4/21/95** 407-495-6578  
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **SIDNEY R. BERNSTEIN, TREAS.**