

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

**FILED
May 04, 2007 8:00 am
Secretary of State**

05-04-2007 90101 024 ****61.25

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1. Entity Name
BLUE WATER VILLAS CONDOMINIUM ASSOCIATION,
INC.

Principal Place of Business
3744 SE 12TH AVE
CAPE CORAL, FL 33904 US

Mailing Address
C/O PROFESSIONALLY YOURS
PO BOX 100831
CAPE CORAL, FL 33910-0831 US

2. Principal Place of Business - No P.O. Box #
615 Cape Coral Pkwy W
Suite, Apt. #, etc.
#103

3. Mailing Address
96 AMERICAN CONDO MGT
Suite, Apt. #, etc.
PO Box 100399

City & State
CAPE CORAL, FL
Zip 33914 Country

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CAPE CORAL, FL
Zip 33914 Country



05012007 Chg-NP CR2E037 (12/06)

4. FEI Number 65-0688303	Applied For
	Not Applicable

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

6. Name and Address of Current Registered Agent

TEAGUE, GEORGE
PROFESSIONALLY YOURS, INC
8270 COLLEGE PARKWAY, #103
FORT MYERS, FL 33919

Name Susan Kase

Street Address (P.O. Box Number is Not Acceptable)
American Condo Mgt Co

615 Cape Coral Parkway #103

City Cape Coral FL Zip Code 33914

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

4/30/07

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE STD
NAME SHERWELL, CHERI
STREET ADDRESS 3744 SE 12TH AVE #202
CITY-ST-ZIP CAPE CORAL, FL 33904

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE D
NAME DEIBLER, HAROLD
STREET ADDRESS 3744 SE 12TH AVE #103
CITY-ST-ZIP CAPE CORAL, FL 33904

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE VD
NAME KASUBICK, TED
STREET ADDRESS RR #3 BOX 287
CITY-ST-ZIP PHILIPSBURG, PA 16866

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE PD
NAME KENNEDY, RAY
STREET ADDRESS 3744 SE 12TH AVE #203
CITY-ST-ZIP CAPE CORAL, FL 33904

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/07

339.542.4404

Date

Daytime Phone #