


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2006 8:00 am
Secretary of State

03-15-2006 90093 014 ****61.25

DOCUMENT # N98000001715 1. Entity Name WATERSTREET AT CELEBRATION CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 701 CELEBRATION AVE. CELEBRATION, FL 34747			Mailing Address 701 CELEBRATION AVE. CELEBRATION, FL 34747		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 58-2447135	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WATERSTREET AT CELEBRATION 701 CELEBRATION AVE. CELEBRATION, FL 34747			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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.					
SIGNATURE <u>GARY KLINER</u> VICEPRESIDENT Gary Klinier 2-13-06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KLINER, GARY 701 CELEBRATION AVE CELEBRATION, FL 34747	Vice President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition GARY KLINER 701 Celebration Ave Celebration, FL 34747			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT PRITCHARD, DAVID 701 CELEBRATION AVE. CELEBRATION, FL 34747	Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition David Pritchard 701 celebration Ave Celebration, FL 34747			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MILLER, RONALD 701 CELEBRATION AVE CELEBRATION, FL 34747	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Robert NILES 701 celebration Ave Celebration, FL 34747			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> 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: <u>Gary Klinier</u> 2-13-06 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					