

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003018

FILED
Apr 19, 2005
Secretary of State

Entity Name: WAVERLY PLACE IV ASSOCIATION, INC.

Current Principal Place of Business:

1228 W. LAS OLAS BLVD
FORT LAUDERDALE, FL 33312

New Principal Place of Business:

Current Mailing Address:

1228 W. LAS OLAS BLVD
FORT LAUDERDALE, FL 33312

New Mailing Address:

FEI Number: 65-0966320

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWENSON, RANDALL S
1228 W LAS OLAS BLVD
FORT LAUDERDALE, FL 33312 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: SWENSON, RANDALL S
Address: 1228 N LAS OLAS BLVD
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: TD () Delete
Name: POWERS, MICHAEL
Address: 1226 W. LAS OLAS BLVD
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: SD () Delete
Name: DESOUZA, MARCUS
Address: 1232 W. LAS OLAS BLVD
City-St-Zip: FORT LAUDERDALE, FL 33312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SWENSON, RANDALL S
Address: 1228 W LAS OLAS BLVD
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: TD (X) Change () Addition
Name: MOORE, JASON
Address: 1226 W. LAS OLAS BLVD
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RANDALL S SWENSON

PD

04/19/2005

Electronic Signature of Signing Officer or Director

Date