

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Jun 23, 2006
Secretary of State**

DOCUMENT# P03000113649

Entity Name: WATERWAYS HOMES REALTY, INC.

Current Principal Place of Business:

11985 COLLIER BLVD.
SUITE #5
NAPLES, FL 34116

New Principal Place of Business:

Current Mailing Address:

11985 COLLIER BLVD.
SUITE #5
NAPLES, FL 34116

New Mailing Address:

FEI Number: 20-0322238 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

E.H.G. RESIDENT AGENTS, INC.
5100 TOWN CENTER CIRCLE, STE. 430
BOCA RATON, FL 33486 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: P () Delete
Name: GOLAN, AMNON
Address: 11860 W STATE RD 84 STE B15
City-St-Zip: DAVIE, FL 33330

Title: VPS () Delete
Name: DAVENPORT, RICHARD
Address: 11860 W STATE RD 84, STE B15
City-St-Zip: DAVIE, FL 33330

Title: VP () Delete
Name: ROBERT, MILLER
Address: 3350 BRIDLE PATH LANE
City-St-Zip: WESTON, FL 33331

Title: VP () Delete
Name: BRIAN, SELIGMAN
Address: 15122 SUMMIT PLACE CR
City-St-Zip: NAPLES, FL 34119

Title: VPT () Delete
Name: MARLENE, MEADE
Address: 14627 COLLIER BOULEVARD
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: VPT (X) Change () Addition
Name: MAXINE, RABNEY
Address: 14627 COLLIER BOULEVARD
City-St-Zip: NAPLES, FL 34119

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD DAVENPORT

VPS

06/23/2006

Electronic Signature of Signing Officer or Director

Date