


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2005 8:00 am
Secretary of State

03-16-2005 90026 035 ***150.00

DOCUMENT # P04000056041

1. Entity Name
WCI AMENITIES, INC.



Principal Place of Business
**24301 WALDEN CENTER DRIVE
 BONITA SPRINGS, FL 34134**


Mailing Address
**24301 WALDEN CENTER DRIVE
 BONITA SPRINGS, FL 34134**

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

Zip Country



02012005 Chg-P CR2E034 (10/03)

4. FEI Number
20-1179424

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**HASTINGS, VIVIEN N
 24301 WALDEN CENTER DRIVE
 BONITA SPRINGS, FL 34134**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> Delete
NAME	STARKEY, JERRY L
STREET ADDRESS	24301 WALDEN CENTER DRIVE
CITY-ST-ZIP	BONITA SPRINGS, FL 34134
TITLE	D <input type="checkbox"/> Delete
NAME	DIETZ, JAMES P
STREET ADDRESS	24301 WALDEN CENTER DRIVE
CITY-ST-ZIP	BONITA SPRINGS, FL 34134
TITLE	D <input type="checkbox"/> Delete
NAME	FRY, DAVID L
STREET ADDRESS	24301 WALDEN CENTER DRIVE
CITY-ST-ZIP	BONITA SPRINGS, FL 34134
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	DV <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DIETZ, JAMES P.
STREET ADDRESS	24301 WALDEN CENTER DRIVE
CITY-ST-ZIP	BONITA SPRINGS, FL 34134
TITLE	DP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRY, DAVID L.
STREET ADDRESS	24301 WALDEN CENTER DRIVE
CITY-ST-ZIP	BONITA SPRINGS, FL 34134
TITLE	VT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ADELMAN, STEVEN C.
STREET ADDRESS	24301 WALDEN CENTER DRIVE
CITY-ST-ZIP	BONITA SPRINGS, FL 34134
TITLE	VS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HASTINGS, VIVIEN N.
STREET ADDRESS	24301 WALDEN CENTER DRIVE
CITY-ST-ZIP	BONITA SPRINGS, FL 34134
TITLE	VAS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CULLEN, JAMES D.
STREET ADDRESS	24301 WALDEN CENTER DRIVE
CITY-ST-ZIP	BONITA SPRINGS, FL 34134

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Wm. H. Hays* **3/11/05** **2394988605**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

40033066

Additional Officers – WCI Amenities, Inc.
Document # P01000056041
2005 For Profit Corporation
Amended Annual Report

10. Officers and Directors	
Title:	V
Name:	John F. Coolahan
Street Address:	24301 Walden Center Drive
City-St-Zip:	Bonita Springs, Florida 34134
Title:	V
Name:	Edward D'Alessandro
Street Address:	24301 Walden Center Drive
City-St-Zip:	Bonita Springs, Florida 34134
Title:	V
Name:	Jennifer Hjalmsquist
Street Address:	24301 Walden Center Drive
City-St-Zip:	Bonita Springs, Florida 34134
Title:	V
Name:	Candace B. Jorritsma
Street Address:	24301 Walden Center Drive
City-St-Zip:	Bonita Springs, Florida 34134
Title:	V
Name:	Richard G. Newman
Street Address:	24301 Walden Center Drive
City-St-Zip:	Bonita Springs, Florida 34134
Title:	V
Name:	Edward Sanabria
Street Address:	24301 Walden Center Drive
City-St-Zip:	Bonita Springs, Florida 34134