

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726946

Entity Name: WATERWAY WEST, INC.**Current Principal Place of Business:**315 N. CAUSEWAY
NEW SMYRNA BEACH, FL 32169**Current Mailing Address:**315 N. CAUSEWAY
NEW SMYRNA BEACH, FL 32169**FEI Number: 59-1578126****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BAUMANN, KARLA L
391 S. TIMBERLANE DRIVE
NEW SMYRNA BEACH, FL 32168 US*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

Officer/Director Detail :

Title TREASURER
Name KIERAN, VICKI
Address 315 N. CAUSEWAY
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title ASST. TREASURER
Name MARTIN, STEVE
Address 315 N. CAUSEWAY C403
City-State-Zip: NEW SMYRNA BCH FL 32169

Title VP
Name SIMPSON, SANDY
Address 315 N. CAUSEWAY
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title SECRETARY
Name DUNPHY, LISA
Address 315 N. CAUSEWAY
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title DIRECTOR
Name WENGEL, KENNY
Address 315 N. CAUSEWAY
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title PRESIDENT
Name JABAUT, ARLENE
Address 315 N. CAUSEWAY
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title DIRECTOR
Name BRIGGS, DIANE
Address 315 NORTH CAUSEWAY
City-State-Zip: NEW SMYRNA BEACH FL 32169

I hereby 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 all other like empowered.

SIGNATURE: VICKI KIERAN**TREASURER****02/02/2015**

Electronic Signature of Signing Officer/Director Detail

Date