

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000003740

FILED
Jan 16, 2009
Secretary of State

Entity Name: 5002 WEST WATERS OWNER CORP

Current Principal Place of Business:

1395 BRICKELL AVENUE
SUITE 680
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

1395 BRICKELL AVENUE
SUITE 680
MIAMI, FL 33131

New Mailing Address:

FEI Number: 20-4758189 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CPT () Delete
Name: LIMBURG, ANDREAS
Address: LIMMATQUIA 26, PO BOX 263
City-St-Zip: CH-8024 ZURICH, OC

Title: VPVC () Delete
Name: ROLIN, PIERRE N
Address: SUITE 3C, PRINCES HOUSE 38 JERMYN ST
City-St-Zip: LONDON SW1Y 6DN, OC

Title: D () Delete
Name: HACKETT, KEVIN R
Address: 1221 AVENUE OF THE AMERICAS 29TH FL
City-St-Zip: NEW YORK, NY 10020

Title: S () Delete
Name: OPAR, JOHN L
Address: 599 LEXINGTON AVENUE
City-St-Zip: NEW YORK, NY 10022

Title: AT () Delete
Name: HALL, STEVEN
Address: 1395 BRICKELL AVENUE #680
City-St-Zip: MIAMI, FL 33131

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

I hereby certify that the information supplied with this filing does not qualify 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: STEVE HALL

AT

01/16/2009

Electronic Signature of Signing Officer or Director

_____ Date