

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01768

FILED
Apr 30, 2004
Secretary of State

Entity Name: WATERWAY VILLAGE OF KISSIMMEE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

% DYNAMIC PROPERTY MANAGEMENT
1000 EMMETT ST. #201
KISSIMMEE, FL 34741 US

New Principal Place of Business:

Current Mailing Address:

% DYNAMIC PROPERTY MANAGEMENT
1000 EMMETT ST. #201
KISSIMMEE, FL 34741 US

New Mailing Address:

FEI Number: 59-3106521 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MCCULLOH, NEIL
1065 MAITLAND CENTER COMMONS BLVD
MAITLAND, FL 32751 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: SHIPPEY, HUBERT
Address: 307 WISCONSIN AVENUE
City-St-Zip: SAINT CLOUD, FL 34769

Title: TD () Delete
Name: LIEBERMAN, GERHART
Address: 3964 HUNTERS ISLE DR
City-St-Zip: ORLANDO, FL 32837

Title: DS () Delete
Name: SCOTT, EULA
Address: 2509 CECILE ST
City-St-Zip: KISSIMMEE, FL

Title: D () Delete
Name: KING, JEDDIE
Address: 19 S. FLAG COURT
City-St-Zip: KISSIMMEE, FL 34759

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: PICOLINO, TONY
Address: 4142 FLYING FORTRESS AVE
City-St-Zip: KISSIMMEE, FL 34741

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

Title: D (X) Change () Addition
Name: RAMBHACUSS, TONY MR
Address: 339 Highbrook Blvd
City-St-Zip: OCOEE, FL 34761

Title: DT () Change (X) Addition
Name: COSME, NEILDE
Address: 908 MESA OAK COURT
City-St-Zip: KISSIMMEE, FL 34744

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: HUBERT SHIPPEY

DP

04/30/2004

Electronic Signature of Signing Officer or Director

Date