

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000010821

**FILED**  
**Jan 12, 2012**  
**Secretary of State**

**Entity Name:** WATER RIDGE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

901 NORTH LAKE DESTINY DRIVE  
SUITE 110  
MAITLAND, FL 32751

**New Principal Place of Business:**

**Current Mailing Address:**

901 NORTH LAKE DESTINY DRIVE  
SUITE 110  
MAITLAND, FL 32751

**New Mailing Address:**

**FEI Number:** 20-3506091

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WEBB, ROBIN L  
901 N LAKE DESTINY DR STE 110  
MAITLAND, FL 32751 US

**Name and Address of New Registered Agent:**

RUBIN, DUFF  
901 N LAKE DESTINY DR STE 110  
MAITLAND, FL 32751 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: DUFF RUBIN

01/12/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: ADAMS, BRINT  
Address: 901 N. LAKE DESTINY DRIVE SUITE 110  
City-St-Zip: MAITLAND, FL 32751

Title: VP  
Name: MARTIN, JANE  
Address: 901 N. LAKE DESTINY DRIVE SUITE 110  
City-St-Zip: MAITLAND, FL 32751

Title: ST  
Name: GERSHOWITZ, BOB  
Address: 901 N. LAKE DESTINY DRIVE SUITE 110  
City-St-Zip: MAITLAND, FL 32751

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: MILDRED MERCED

COMP

01/12/2012

Electronic Signature of Signing Officer or Director

Date