

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED

Sep 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N08790 (0)

1. Corporation Name
THE WATERS OF WEEKI WACHEE PROPERTY OWNERS' ASSOCIATION, INC.



Principal Place of Business
9025 CITRUS WAY BROOKSVILLE FL 34601

Mailing Address
9025 CITRUS WAY BROOKSVILLE FL 34601

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **04/18/1985** 3a. Date of Last Report **02/15/1996**

4. FEI Number **59-2698035** Applied For Not Applicable

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

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

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business
 21 **21** Suite, Apt. #, etc.
 22 **22** City & State
 23 **23** Zip Country
 24 **24** 25 **25** 29 **29** 30 **30**

2a. Mailing Address
 26 **26** c/o Karen Burgaw
 Suite, Apt. #, etc.
 27 **27** 11373 Cortez Blvd.
 City & State
 28 **28** Brooksville, FL
 Zip Country
 29 **29** 34613 30 **30**

9. Name and Address of Current Registered Agent
MCATEER, DERRILL
20491 POWELL ROAD
BROOKSVILLE FL 34609

10. Name and Address of New Registered Agent
 81 Name **PAUL H. NESSLER, JR.**
 82 Street Address (P.O. Box Number is Not Acceptable) **4052 Commercial Way**
 83 **Spring Hill, FL 34606**
 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Paul H. Nessler, Jr.* **9/8/97**
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MCATEER, DERRILL 20491 POWELL ROAD BROOKSVILLE FL <input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SCHINDLER, DAVID R. 111 MADISON STREET TAMPA FL <input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD PHILLIPS, STEVEN J. 8441 JOLLY ROGER DRIVE HUDSON FL <input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	President/Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition John Murray Smart 7275 Crystal Spring Run Spring Hill, FL 34607
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	Vice President/Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Caradonna, Richard 11307 Cortez Blvd Brooksville, FL 34613
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	Treasurer/Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Guarino, Michael 7268 Crystal Spring Run Spring Hill, FL 34607
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	Secretary <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Burgaw, Karen 11373 Cortez Blvd. Brooksville, FL 34613
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Flatau, Arthur 11373 Cortez Blvd. Brooksville, FL 34613
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Harris, Tracy Jr. 9625 Alonzo Road Riverview, FL 33569

14. I do 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 annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *Signature Required* **9-8-97**

CR2E037 (4/97)