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NONPROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **N08790**

1. Corporation Name

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

Principal Place of Business

5465 COMMERCIAL WAY
 SPRINGHILL FL 34606

Mailing Address

5465 COMMERCIAL WAY
 SPRINGHILL FL 34606



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

27 Suite, Apt. #, etc.

28 City & State

29 Zip 30 Country

3. Date Incorporated or Qualified

04/18/1985

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

9. Name and Address of Current Registered Agent

DOUGHERTY, JOHN A CPA
 5465 COMMERCIAL WAY
 SPRINGHILL FL 34606

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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

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 PD DELETE
 NAME SMART, JOHN M
 STREET ADDRESS 7275 CRYSTAL SPRING RUN
 CITY-ST-ZIP SPRING HILL FL

TITLE VPD DELETE
 NAME CARADONNA, RICHARD
 STREET ADDRESS 11307 CORTEZ BLVD
 CITY-ST-ZIP BROOKSVILLE FL

TITLE TD DELETE
 NAME GUARINO, MICHAEL
 STREET ADDRESS 7268 CRYSTAL SPRING RUN
 CITY-ST-ZIP SPRING HILL FL 34607

TITLE S DELETE
 NAME BURCAW, KAREN
 STREET ADDRESS 11373 CORTEZ BLVD
 CITY-ST-ZIP BROOKSVILLE FL

TITLE D DELETE
 NAME FLATAU, ARTHUR
 STREET ADDRESS 11373 CORTEZ BLVD
 CITY-ST-ZIP BROOKSVILLE FL

TITLE D DELETE
 NAME HARRIS, TRACY J
 STREET ADDRESS 9625 ALONZO RD
 CITY-ST-ZIP RIVERVIEW FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

3.1 TITLE Change Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

4.1 TITLE Change Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

6.1 TITLE Change Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

14. I 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED *John Smart*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)