

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12722

FILED
Mar 06, 2006
Secretary of State

Entity Name: WATERVIEW HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2109 WINDWARD PASS
LAKELAND, FL 33813 US

New Principal Place of Business:

Current Mailing Address:

2109 WINDWARD PASS
LAKELAND, FL 33813 US

New Mailing Address:

FEI Number: 59-2636601

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOTWALT, BILL
4132 HATTARAS POINT
LAKELAND, FL 33813 US

Name and Address of New Registered Agent:

SHINN, DARCY PRES.
2059 WINDWARD PASS
LAKELAND, FL 33813 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: DARCY SHINN

03/06/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: WEYBRIGHT, WILLIAM N.
Address: 2126 SANDY HOOK
City-St-Zip: LAKELAND, FL 33813

Title: SD () Delete
Name: SAMPLE, TERESSA
Address: 2011 WINDWARD PASS
City-St-Zip: LAKELAND, FL 33813

Title: D () Delete
Name: BENCE, GARY
Address: 2118 SANDYHOOK
City-St-Zip: LAKELAND, FL 33813

Title: VPD () Delete
Name: SHINN, FRANCIS
Address: 2059 WINDWARD PASS
City-St-Zip: LAKELAND, FL 33813

Title: D () Delete
Name: GARDNER, PAULA
Address: 2074 WINDWARD PASS
City-St-Zip: LAKELAND, FL 33813

Title: D () Delete
Name: SEGRO, JOHN
Address: 2019 HATTARAS POINT
City-St-Zip: LAKELAND, FL 33813

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: SAMPLE, TERESSA
Address: 1400 GRASSLANDS BLVD. ENCLAVE #24
City-St-Zip: LAKELAND, FL 33803

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

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

Title: D (X) Change () Addition
Name: BURKS, GENE
Address: 2003 WINDWARD PASS
City-St-Zip: LAKELAND, FL 33813

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

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DARCY SHINN

PRES

03/06/2006

Electronic Signature of Signing Officer or Director

Date