


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 20, 2007 08:00 AM
Secretary of State

DOCUMENT # N26073 1. Entity Name WATERFORD PLANTATION HOMEOWNERS ASSOCIATION, INC.	
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Principal Place of Business 6268 CRESTWOOD DR TALLAHASSEE, FL 32311 US	Mailing Address 6260 CRESTWOOD DR TALLAHASSEE, FL 32311 US
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DO NOT WRITE IN THIS SPACE



03172007 No Chg-NP CR2E037 (4/08)

4. FEI Number 59-2985588	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BAUGH, KENNETH JR
6260 CRESTWOOD DR
TALLAHASSEE, FL 32311**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$81.25
Due by May 1, 2007**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLARK, MIKE 5003 CRESTWOOD CT TALLAHASSEE, FL 32311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SHALAKO, PAUL 6268 CRESTWOOD DR TALLAHASSEE, FL 32311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT BAUGH, KENNETH JR. 6260 CRESTWOOD DR TALLAHASSEE, FL 32311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS LEWIS, DONALD 6278 LONGWOOD CT TALLAHASSEE, FL 32311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COLE, JOHN 6173 TRAILWOOD CT. TALLAHASSEE, FL 32311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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03/29/07-80068-014 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kenneth Baugh Jr **Kenneth Baugh Jr** 3-17-07 850-488-4870
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #