

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 25, 2006
Secretary of State**

DOCUMENT# N27004

Entity Name: WATERFORD OF PELICAN BAY PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

P O BOX 10369
NAPLES, FL 34101 US

Current Mailing Address:

New Mailing Address:

P O BOX 10369
NAPLES, FL 34101 US

FEI Number: 65-0083481 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

HART, STEPHEN P.
4985 E TAMIAMI TRAIL
NAPLES, FL 34113 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: HENRY, JAMES
Address: 683 ANNEMORE LN
City-St-Zip: NAPLES, FL 34108

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

Title: PD () Delete
Name: MANG, WARREN G
Address: 3 WESTWOOD DR
City-St-Zip: HADDONFIELD, NJ 08033

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

Title: VPD () Delete
Name: FOX, GEORGE
Address: 682 KATEMORE LN.
City-St-Zip: NAPLES, FL 341087521

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: WARREN MANG

PD

04/25/2006

Electronic Signature of Signing Officer or Director

Date