

FILE NOW: FILING FEE IS \$61.25

FILED

**Apr 22 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # N31867 (7)
 1. Corporation Name
WATERFORD VILLAGE COMMUNITY ASSOCIATION, INC.



Principal Place of Business 11922 FAIRWAY LAKES DR FORT MYERS FL 33913 US	Mailing Address 11922 FAIRWAY LAKE DR FORT MYERS FL 33913 US
---	--

3. Date Incorporated or Qualified 04/21/1989	
4. FEI Number 65-0115096	Applied For <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 11924 Fairway Lakes Dr Suite, Apt. #, etc. 22 Suite 2 City & State 23 Fort Myers, FL Zip 24 33913	2a. Mailing Address 26 11924 Fairway Lakes Dr Suite, Apt. #, etc. 27 Suite 2 City & State 28 Fort Myers, FL Zip 29 33913
--	---

9. Name and Address of Current Registered Agent
**SAMUEL DOCKERY
11922 FAIRWAY LAKES DR
FORT MYERS FL 33913**

10. Name and Address of New Registered Agent

81 Name	Karen A. Fick
82 Street Address (P.O. Box Number is Not Acceptable)	11924 Fairway Lakes Drive, Suite 2
83	
84 City	Fort Myers FL
85 Zip Code	33913

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 *Karen A. Fick* **April 13, 1998**
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	<input checked="" type="checkbox"/> DELETE
NAME	CRUMP, PATRICK	
STREET ADDRESS	12596 SHANNONDALE DR.	
CITY-ST-ZIP	FT. MYERS FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	BOYD, LEE	
STREET ADDRESS	370 ELANVILLE LN #322	
CITY-ST-ZIP	FORT MYERS FL	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	CANNINGTON, STACEY	
STREET ADDRESS	12654 SHANNONDALE DR	
CITY-ST-ZIP	FT. MYERS FL	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	TAYLOR, JACKSON	
STREET ADDRESS	12610 SHANNONDALE DRIVE	
CITY-ST-ZIP	FT. MYERS FL	
TITLE	VPD	<input checked="" type="checkbox"/> DELETE
NAME	CLEAVER, BARBARA	
STREET ADDRESS	12584 SHANNONDALE DR	
CITY-ST-ZIP	FT MYERS FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Cannington, Stacey	
1.3 STREET ADDRESS	12654 Shannondale Drive	
1.4 CITY-ST-ZIP	Fort Myers, FL 33913	
2.1 TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	D'Elia, Christine	
2.3 STREET ADDRESS	12620 Shannondale Drive	
2.4 CITY-ST-ZIP	Fort Myers, FL 33913	
3.1 TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Crump, Patrick	
3.3 STREET ADDRESS	12596 Shannondale Drive	
3.4 CITY-ST-ZIP	Fort Myers, FL 33913	
4.1 TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Reitz, Pamela	
4.3 STREET ADDRESS	12634 Shannondale Drive	
4.4 CITY-ST-ZIP	Fort Myers, FL 33913	
5.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Mosley, Robert	
5.3 STREET ADDRESS	11425 Waterford Village Drive	
5.4 CITY-ST-ZIP	Fort Myers, FL 33913	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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.

SIGNATURE: *Stacey Cannington* **Stacey Cannington, Pres. April 13, 1998**

CR2E037 (10/97)