## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N32101

FILED Mar 13, 2006 Secretary of State

Entity Name: WATERFORD POINTE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2180 W SR 434 STE 5000 LONGWOOD, FL 32779 **Current Mailing Address: New Mailing Address:** 2180 W SR 434 STE 5000 LONGWOOD, FL 32779 FEI Number: 59-2948987 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, JAMES W JR SENTRY MANAGEMENT INC 2180 W SR 434 STE 5000 LONGWOOD, FL 32779 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: () Delete (X) Change ( ) Addition KRIBBS, WILLIAM R MALDONADO, VINCENT Name: Name: 12827 WATER POINTE BLVD Address: 13050 WATER POINT BLVD Address: City-St-Zip: WINDERMERE, FL 347865815 City-St-Zip: WINDERMERE, FL 34786 Title: STD () Delete Title: (X) Change ( ) Addition HURSH, JOSEPH Name: BOUVERIE, BILL Name: Address: 1050 OAK POINT CIR Address: 12708 WATER POINT BLVD City-St-Zip: APOPKA, FL 32712 City-St-Zip: WINDERMERE, FL 32786 Title: VPD () Delete Title: SD (X) Change ( ) Addition BIRKINBINE, CURT FRIEDMAN, ALLYSON Name: Name: 12731 WATER POINTE BLVD Address: Address: 13061 WATER POINT BLVD City-St-Zip: WINDERMERE, FL 347865815 City-St-Zip: WINDERMERE, FL 34786 ( ) Change (X) Addition ( ) Delete Title: Title: TD Name: Name: WHITE, JACK 12712 WATER POINT BLVD Address: Address: City-St-Zip: City-St-Zip: WINDERMERE, FL 34786 Title: () Delete Title: ( ) Change (X) Addition HARTMAN, GERRY Name: Name: 2107 WATER KEY DR Address: Address: WINDERMERE, FL 34786 City-St-Zip: 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: VINCENT MALDONADO PD 03/13/2006