

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N92000000099 (3)

1. Corporation Name

WATERFORD IV, INC.



Principal Place of Business

Mailing Address

13500 WORTHINGTON WAY  
BONITA SPRINGS FL 33923  
US

13500 WORTHINGTON WAY  
BONITA SPRINGS FL 33923  
US

3. Date Incorporated or Qualified  
11/03/1992

3a. Date of Last Report  
04/14/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DEBRA ALDRIDGE  
WORTHINGTON COUNTRY CLUB  
13500 WORTHINGTON WAY  
BONITA SPRINGS FL 33923

81 Name Cheryl R. Kraus, P.A.

82 Street Address (P.O. Box Number is Not Acceptable)  
1100 Fifth Avenue South, 3201

83

84 City

Naples,

FL

85 Zip Code  
33940

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

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

CHERYL R. KRAUS

4-29-96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

TITLE DVS ☐ DELETE  
NAME SPADA, NANCY  
STREET ADDRESS 13500 WORTHINGTON WAY  
CITY-ST-ZIP BONITA SPRINGS FL

11 TITLE ☐ Change ☐ Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE DP ☐ DELETE  
NAME WIERENGA, RICHARD  
STREET ADDRESS 13500 WORTHINGTON WAY  
CITY-ST-ZIP BONITA SPRINGS FL

21 TITLE ☐ Change ☐ Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE DVT ☒ DELETE  
NAME MARKWOOD, ROBERT  
STREET ADDRESS 13500 WORTHINGTON WAY  
CITY-ST-ZIP BONITA SPRINGS FL

31 TITLE ☒ Change ☐ Addition  
32 NAME DVT  
33 STREET ADDRESS Henthorn, Robert  
34 CITY-ST-ZIP 13500 Worthington Way  
Bonita Springs, FL 33923

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition  
62 NAME 800001843288  
63 STREET ADDRESS -05/29/96--01119--041  
64 CITY-ST-ZIP \*\*\*61.25

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 of this change report on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

Robert F. Henthorn  
Robert F. Henthorn

4-25-96

05 5/1/96

CR2E037 (12/95)