FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000003972

Corporation Name

WATERFORD RIDGE PROPERTY OWNERS' ASSOCIATION, IN

Principal Place of Business

2020 CLUBHOUSE DR. SUN CITY CENTER FL 33570

2. Principal Place of Business

Mailing Address

2a. Mailing Address

26

2020 CLUBHOUSE DR. SUN CITY CENTER FL 33570

FILED May 05, 1999 8:00 am § Secretary of State

05-05-1999 90151 035 ****61.25



3. Date Incorporated or Qualifed

09/01/1993

City & State City & State 28 City & State 5. Certificate of Status Desired Fee Required Fee Required \$5. Certificate of Status Desired Fee Required	Suite, Apt.	#, etc.		pr. #, erc.				ED-20267	'CO		_ 	Zined I OI		
Second Companies Second Comp	22							39-32301	09					
Zip	City & State	9	⊢	State				5. Certificate of	Status Desired					
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9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name and Address of New Registered Agent 12. Street Address (P.O. Box Number is Not Acceptable) 13. Street Address (P.O. Box Number is Not Acceptable) 14. Description of the provisions of Sections 6 (P.O. Box Number is Not Acceptable) 15. Street Address (P.O. Box Number is Not Acceptable) 16. Street Address (P.O. Box Number is Not Acceptable) 17. Pursuant to the provisions of Sections 6 (P.O. Box Number is Not Acceptable) 18. Street Address (P.O. Box Number is Not Acceptable) 18. Street Address (P.O. Box Number is Not Acceptable) 18. Street Address (P.O. Box Number is Not Acceptable) 18. Street Address (P.O. Box Number is Not Acceptable) 18. Street Address (P.O. Box Number is Not Acceptable) 19. Street Address (P.O. Box Number is Not Acceptable) 10. Street Address (P.O. Box Number is Not Acceptable) 10. Street Address (P.O. Box Number is Not Acceptable) 11. Number is Not Acceptable in Not Acceptable in Not Acceptable is Not Acceptable in Not Acceptable in Not Acceptable is Not Acceptable in Not Acceptable in Not Acceptable is Not Acceptable in Not Acceptable in Not Acceptable is Not Acceptable in Not Acceptable in Not Acceptable is Not Acceptable in Not Acce	Zip				1	2.33.00.00.00.00.00.00.00.00.00.00.00.00.								
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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 supplier ental 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 eceiver 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 by or attachment with an address with all the removered.

SIGNATURE:

GNATURE AND TWEED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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