

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005694

FILED  
Mar 16, 2009  
Secretary of State

Entity Name: WATERFORD PLACE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

6939 N WICKHAM RD  
MELBOURNE, FL 32940 US

**New Principal Place of Business:**

**Current Mailing Address:**

6939 N WICKHAM RD  
MELBOURNE, FL 32940 US

**New Mailing Address:**

FEI Number: 59-3216426      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STEWART, FRANCES M  
6939 N WICKHAM RD  
MELBOURNE, FL 32901 US

**Name and Address of New Registered Agent:**

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:**

Title: PD ( ) Delete  
Name: ANGELL, EDGAR  
Address: 935 FOSTORIA DRIVE  
City-St-Zip: MELBOURNE, FL 32940

Title: TD ( ) Delete  
Name: FITZGERALD, SUSAN M  
Address: 900 FOOTORIA DR  
City-St-Zip: MELBOURNE, FL 32940

Title: D ( ) Delete  
Name: WALES, THOMAS R  
Address: 1010 ARIEL WAY  
City-St-Zip: MELBOURNE, FL 32940

Title: SD ( ) Delete  
Name: CATALINES, CHRISTINE  
Address: 924 FOSTORIA DR  
City-St-Zip: MELBOURNE, FL 32940

Title: VD ( ) Delete  
Name: CONROY, EDWARD  
Address: 904 FOSTORIA DRIVE  
City-St-Zip: MELBOURNE, FL 32940

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: ANGELL, EDGAR L  
Address: 935 FOSTORIA DRIVE  
City-St-Zip: MELBOURNE, FL 32940

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

Title: D (X) Change ( ) Addition  
Name: MYERS, PATSY  
Address: 916 FOSTORIA DR.  
City-St-Zip: MELBOURNE, FL 32940

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

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

I hereby certify that the information supplied with this filing does not qualify 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: EDGAR L. ANGELL

PD

03/16/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date