

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005694

**FILED**  
**Mar 15, 2010**  
**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  
Name: ANGELL, EDGAR  
Address: 935 FOSTORIA DRIVE  
City-St-Zip: MELBOURNE, FL 32940

Title: TRD  
Name: FITZGERALD, SUSAN M  
Address: 900 FOSTORIA DR  
City-St-Zip: MELBOURNE, FL 32940

Title: D  
Name: MYERS, PATSY  
Address: 916 FOSTORIA DR.  
City-St-Zip: MELBOURNE, FL 32940

Title: SECD  
Name: CATALINE, CHRISTINE  
Address: 924 FOSTORIA DR  
City-St-Zip: MELBOURNE, FL 32940

Title: VPD  
Name: CONROY, ED  
Address: 904 FOSTORIA DRIVE  
City-St-Zip: MELBOURNE, FL 32940

I hereby 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 all other like empowered.

SIGNATURE: SUSAN FITZGERALD

TRD

03/15/2010

Electronic Signature of Signing Officer or Director

Date