FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996

SIGNATURE:

DOCUMENT #

N9400002935 (4)

WATERFORD LAKES TRACT N-25A NEIGHBORHOOD ASSOCIATION, INC.

TION, I	INC.						
Principal Place of Business Mailing Address						# 06 46 01	
12553 LAKE ORLANDO FL	UNDERHILL DRIVE L 32828	12553 LAKE UNDERHILL ORLANDO FL 32828	DRIVE				
					3. Date Incorporated or Qualified	3a. Date of Las	
A Driveriant D		A Della della			06/09/1994	03/15/	1
2. Principal Pi. 21	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
Suite, Apt.	#. etc	Suite, Apt. #, etc.			59-3255268	<u> </u>	Not Applicable
22		27			5. Certificate of Status Desired	1 1 7 -	5 Additional Required
City & State	3	City & State			6. Election Campaign Financing		00 May Be
23		28			Trust Fund Contribution		ed to Fees
Zip	Country	Ziρ	Country	'	8. This corporation has liability for		s. 199.032,
24	25	29	30		I	Yes No	
	g, Name and Address of Curre	nt Registered Agent	81	Nama	10. Name and Address of New	Registered Agent	
			6'		CERNANDE V		
	SMITH, RALPH E SR				Gress (P.O. Box Number is Not Acceptable) MARK TWAIN BLVD.		
	AKE UNDERHILL DRIVE		63	44 5	MARK TWAIN -	SLVU.	
ORLAND	OO FL 32828		~				
			84	City	ANDO	FL 85 3	in Code 2828
11 Pursuant	to the provisions of Sections 617 050	2 and 617 1508. Florida Statute	e the above		ration submits this statement for the pu		
or register	red agont, or both, in the State of Flor	ida. Such change was authorize	ed by the corr	oration's boa	ard of directors. I hereby accept the app	xointment as registere	d agent. I am
	th, and accept the obligations of, Sec	tion 617.0503, Florida Statutes.			1-	24-96	
SIGNATURE !	Stgriature typed or printed name of registered agen			nt signature require	ed when reinstating)	DATE	
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OF		ORS IN 12
TITLE	PD	☐ DELETE	11 TITLE			☐ Change	Addition
NAME	SMITH, RALPH E SR		1.2 NAME				
STHEET ADDRESS	12553 LAKE UNDERHILL DRI	VE	13 STREE	ADDRESS			
CITY-ST-ZiP	ORLANDO FL 32828		1.4 CITY - 3	ST-ZIP			
TITLE	VD .	DELETE	21 TITLE			Change	Addition
NAME	RIVERA, MIRIAM		2 2 NAME				
STREET ADDRESS	12553 LAKE UNDERHILL DRI	VE	2 3 STREE	ADDRESS			
CITY - ST - ZIP	ORLANDO FL 32828		2 4 CiTY -	ST-ZIP			
TITLE	STD	DELETE	3 1 TITLE	Ī		☐ Change	Addition
NAME	VELASQUEZ, IVETTE		3 2 NAME				
STREET ADDRESS	12553 LAKE UNDERHILL DRI	VE	3 3 STREET				
CITY-ST-ZIP TITLE	ORLANDO FL 32828	DELETE	3 4. CITY - 4.1 TITLE	SI-ZIP		Change	☐ Addition
NAMÉ		Florecit	4.1 IHLE 4. 2 NAME				☐ ¥000000
STREET ADDRESS				ADDRESS			
CITY-ST-ZIF			4.3 STREET				
TITLE		DELETE	5.1 TITLE	411		☐ Change	Addition
NAME		_	5.2 NAME				
STREET ADDRESS			5 3 STREET	ADDRESS			
CITY-ST-ZIP			5 4 CITY - 5				
TITLE	DELETE		61 TITLE			☐ Change	Addition
NAME			62 NAME			- · · · · ·	
STREET ADDRESS		_	63 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY - 5				
14. I do hereb	y certify that the information supplied	with this filing is voluntarily furni	shed and doe	s not qualify t	for the exemption stated in Section 119	07(3)(k), Florida Statu	ites. I further
14. I do hereb certify that oath; that appears in	y certify that the information supplied t the information indicated on this and I am an officer or director of the corpo n Block 12 or Block (3) changed, or	with this filing is voluntarily furniful report or supplemental annuoration or the Jeceiver or truffed on an attachment with a faddre	shed and doe ual report is true empowered ess.	s not qualify to be and accurate to to execute the	for the exemption stated in Section 119 ate and that my signature shall have the is report as required by Chapter 617, F	.07(3)(k), Florida Statu i same legal effect as lorida Statutes; and th	ites. I further if made under nat my name