

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003800

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** WATERFORD LAKES TRACT N-19 NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

860 N. ORANGE AVENUE, SUITE B  
ORLANDO, FL 32801 US

**New Principal Place of Business:**

860 N. ORANGE AVENUE, SUITE 226  
ORLANDO, FL 32801 US

**Current Mailing Address:**

860 N. ORANGE AVENUE, SUITE B  
ORLANDO, FL 32801 US

**New Mailing Address:**

860 N. ORANGE AVENUE, SUITE 226  
ORLANDO, FL 32801 US

**FEI Number:** 59-3412398

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ORLANDO EQUITY  
860 N. ORANGE AVENUE  
SUITE B  
ORLANDO, FL 32801 US

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

ORLANDO EQUITY  
860 N. ORANGE AVENUE  
SUITE 226  
ORLANDO, FL 32801 US

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:

04/30/2012

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: FEDERICO, NINO  
Address: 860 N ORANGE AVE STE 226  
City-St-Zip: ORLANDO, FL 32801

Title: TD  
Name: HOFFMAN, PAT  
Address: 860 N ORANGE AVE STE226  
City-St-Zip: ORLANDO, FL 32801

Title: VP  
Name: LECHTNER, CAROL  
Address: 860 N. ORANGE AVE STE226  
City-St-Zip: ORLANDO, FL 32801

Title: D  
Name: CARRIGAN-STOCKWELL, FROSINE  
Address: 860 N. ORANGE AVE STE 226  
City-St-Zip: ORLANDO, FL 32801

Title: SD  
Name: STOUGHTON, GREG  
Address: 860 N ORANGE AVE STE 226  
City-St-Zip: ORLANDO, FL 32801

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: NINO FEDERICO

PD

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date