

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001367

FILED  
Jan 17, 2011  
Secretary of State

**Entity Name:** WATERFORD PLACE OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1001 EAST ATLANTIC AVE., STE 202  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

**Current Mailing Address:**

1000 MARKET STREET  
SUITE 300  
PORTSMOUTH, NH 03801

**New Mailing Address:**

FEI Number: 65-1091970

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CRITCHFIELD, RICHARD H  
1100 LINTON BLVD.  
SUITE C-4  
DELRAY BEACH, FL 33444 US

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

CRITCHFIELD, RICHARD H  
1001 E. ATLANTIC AVE.  
SUITE 201  
DELRAY BEACH, FL 33443 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:

01/17/2011

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: WALSH, MARK  
Address: 1001 EAST ATLANTIC AVE., STE 202  
City-St-Zip: DELRAY BEACH, FL 33483

Title: VSTD  
Name: WALSH, MICHAEL  
Address: 1001 EAST ATLANTIC AVE., STE 202  
City-St-Zip: DELRAY BEACH, FL 33483

Title: VD  
Name: MCMURRAIN, THOMAS T  
Address: 1001 EAST ATLANTIC AVE., STE 202  
City-St-Zip: DELRAY BEACH, FL 33483

Title: D  
Name: WALSH, WILLIAM  
Address: 1000 MARKET STREET, STE 300  
City-St-Zip: PORTSMOUTH, NH 03801

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: MARK WALSH

PD

01/17/2011

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

\_\_\_\_\_  
Date