

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # 769794 (9)

1. Corporation Name

WATERWOOD II PROPERTY OWNER'S ASSOCIATION, INC.

95 FEB 20 AM 11:09

Principal Place of Business

Mailing Address

P O BOX 1371
P.O. BOX 1371
HIGHLAND CITY FL 33846

P O BOX 1371
P.O. BOX 1371
HIGHLAND CITY FL 33846

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/11/1983	3a. Date of Last Report 02/15/1994
4. FEI Number 59-2479652	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STUTZMAN, KEN
6022 SOURWOOD WAY
BARTOW FL 33830

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME STUTZMAN, KEN
STREET ADDRESS 6022 SOURWOOD WAY
CITY-ST-ZIP BARTOW FL

1.1 TITLE
1.2 NAME RICHARD D. HUPFER
1.3 STREET ADDRESS 4905 IRONWOOD TRAIL
1.4 CITY-ST-ZIP BARTOW, FLA. 33830

☒ Change ☐ Addition

TITLE DP
NAME DOBSON, CLINT
STREET ADDRESS 6106 SOURWOOD WAY
CITY-ST-ZIP BARTOW FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
NAME POWELL, ANNE
STREET ADDRESS 5012 IRONWOOD TR
CITY-ST-ZIP BARTOW FL

3.1 TITLE SD
3.2 NAME POWELL, ANNE
3.3 STREET ADDRESS 5012 IRONWOOD TRAIL
3.4 CITY-ST-ZIP BARTOW, FLA 33830

☒ Change ☐ Addition

TITLE TD
NAME DOBSON, SANDRA E.
STREET ADDRESS 6106 SOURWOOD WAY
CITY-ST-ZIP BARTOW FL

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE SD
NAME WICKMAN, JANET
STREET ADDRESS 6028 SOURWOOD WAY
CITY-ST-ZIP BARTOW FL

5.1 TITLE VD
5.2 NAME JOHN KEYS
5.3 STREET ADDRESS 6016 SOURWOOD WAY
5.4 CITY-ST-ZIP BARTOW, FLA. 33830

☒ Change ☐ Addition

TITLE VD
NAME WICKMAN, ROBIN
STREET ADDRESS 6028 SOURWOOD WAY
CITY-ST-ZIP BARTOW FL

6.1 TITLE B
6.2 NAME DARRYL COFFEY
6.3 STREET ADDRESS 6025 SOURWOOD WAY
6.4 CITY-ST-ZIP BARTOW, FLA. 33830

☒ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Clint Dobson - CLINT DOBSON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/12/95 (813) 297-6895