## 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

N95000003989 (9)

DOCUMENT #
1. Corporation Name WATERFORDE AT HUNTER'S GREEN NEIGHBORHOOD ASSOCI ATION, INC.

Principal Place of Business

Mailing Address

3/197 

8 <del>700 HUNTER'S OREEN DR</del> IVE TAM <mark>PA FL 336</mark> 47		8709 HUNTER'S GREEN SPRIVE TAMPA EL 33847			
		•		3. Date Incorporated or Qualified 08/18/1995	3a. Date of Last Report
2. Principal Pla	ce of Business	2a. Mailing Address		4. FEI Number	Applied For
21 12973	3 Teleson Prokury N	26 824 Ghst	Pletcher Av	e. 59-3349563	Not Applicable
Suite, Apt. #		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	A. Alorios	City & State  28 TAMOA F	POLIDA	Election Campaign Financing     Trust Fund Contribution	S5.00 May Be Added to Fees
Zip Country Zip			Country	8. This corporation has liability for intangible tax under s. 199.032,	
24 33637	25 USA	29 33612-2601	30 U.S.A.	, longer ofference	Yes No
9. Name and Address of Current Registered Agent 81				10. Name and Address of New Registered Agent	
	WILLIAM B NIERIG GREEN DRIVE L 33647			R. Scott Ga: 1914 Address (P.O. Box Number is Not Acceptable 2973 Telecom	
11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, p-both, in the State of Florida, Such otherwise authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and about the obligations of, section 617,0503, lorida statutes.  SIGNATURE  Signature typed or printed name of registered agent and the hopping to the corporation of the corporation of directors. I hereby accept the appointment as registered agent. I am familiar with and about the obligations of section 617,0503, lorida statutes.  SIGNATURE  Signature typed or printed name of registered agent and the hopping to the corporation of directors. I hereby accept the appointment as registered agent. I am familiar with an application of the corporation of directors. I hereby accept the appointment as registered agent. I am familiar with a province of the corporation of directors. I hereby accept the appointment as registered agent. I am familiar with a province of the corporation of directors. I hereby accept the appointment as registered agent. I am familiar with a province of the corporation of directors. I hereby accept the purpose of changing its registered of directors. I hereby accept the appointment as registered agent. I am familiar with a province of the corporation of directors. I hereby accept the purpose of changing its registered of directors. I hereby accept the appointment as registered agent. I am familiar with a province of the corporation of directors. I hereby accept the appointment as registered agent. I am familiar with a province of the corporation of the corporat					
12.	OFFICERS AND	DIRECTORS	13.		CERS AND DIRECTORS IN 12
TITLE	GREENE: WILLIAM B.	Phereis		AND OC	
NAME	8709 HUNTER'S GREEN DRIVE	•	12 NAME	12973 Telecom Pract	way N.
STREET ADDRESS	TAMPA FL 33647	<u>-</u>	1.3 STREET ADORESS		
CITY-ST-ZIP	D	NO ELETE	1.4 CITY-ST-ZIP	JAMPA, Planoa 336:	Genange Addution
TITLE	— <u>—                                   </u>	DELETE	2 1 TITLE	SID Secretary	Estange C. Adulton
NAME	BEAKLEY, JOHN C. 8709 HUNTER'S GREEN DRIVI	<del>.</del>	2 2 NAME	Pricto Alis 12913 Telecim	Parkway N.
STREET ADDRESS	TAMPA FL 33647	<u>.</u>	2 3 STREET ADDRESS	72473 7000	1
CITY-ST-ZIP	***************************************		2 4 CITY-ST-ZIP	The Asia Maria	368/
TITLE	D	<b>™</b> ØELETE	3 1 TITLE	Smith Christopher	mange Addition
NAME	MCMURTY, NELL L	•	3 2 NAME	The Smith; Christopher 12973 Teleron	Harlamy D.
STREET ADDRESS	8709 HUNTER'S GREEN DRIVI	=	3 3 STREET ADDRESS		22127
CITY-ST-ZIP	TAMPA FL 33647		3 4. CITY-ST-ZIP	TAMPS FC. 5	
TITLE		DELETE	4 1 TITLE		☐ Change ☐ Addition
NAME			4 2 NAME		İ
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITL€		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADORESS	<b>80000178</b> -04/19/96010	ie cze
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	61 TITLE	***61.25	☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-7IP			6.4 CITY - ST - ZIP		
14. Ldo hereb	v certify that the information supplied w	ith this filing is voluntarily furnis	hed and does not out	lify for the exemption stated in Section 119	.07(3)(k), Florida Statutes. I further

certify that the information supplied with this litting is voluntarily furnished and does not quality for the exemption stated in Section 119.07(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 eath; 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 altachment with an address.