2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # N43358 06-08-2005 90001 027 ****61.25 WATERFORD HOMEOWNERS ASSOCIATION OF LAKELAND, INC. Mailing Address Principal Place of Business **5018 GREENBROOK LANE** P.O. BOX 5284 LAKELAND, FL 33811 LAKE LAND, FL 33807-5284 %D0//14666666D& 2. Principal Place of Business 3. Mailing Address Suite, Apt. #. etc. Suite, Apt. #, etc. 02242005 Chg-NP CR2E037 (10/03) City & State City & State 4. FEI Number 59-3178191 Applied For Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ELLIOT, KAY F 5018 GREENBROOK LANE Street Address (P.O. Box Number is Not Acceptable) LAKELAND, FL 33811 Zip Code 8. The above named entity submitta this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2005 Added to Fees **OFFICERS AND DIRECTORS** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ∑ Delete ITTLE TITLE 127 Change ☐ Addition **TURNER, RODNEY** MOSER, RICK NAME: NAME 3544 ASHLING DRIVE STREET ADDRESS 3551 ASHLING DRIVE STREET ADDRESS LAKELAND, FL 33803 CITY-ST-ZIP LAKELAND, FL 33803 CITY-ST-ZIP Delete TITLE Addition Channe TURNER, RODNEY PRASSE, BARBARA NAME NAME 3632 LISMORE DRIVE STREET ADDRESS 3544 ASHLING DRIVE STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33803 CITY-ST-ZIP Lakeland, FL 33803 TITLE 🔯 Delete TITLE ☐ Change X Addition HALLOCK, CYNTHIA SCHUCHT, BARBARA NAME 3607 ASHLING DRIVE STREET ADDRESS STREET ADDRESS 3581 ASHLING DRIVE LAKELAND, FL 33803 CITY-ST-ZIP CITY-ST-ZIP LAKELAND, FL 33803 TITLE Delete TITLE Addition CROSBY, KAY NAME NAME HAMIC, WENDY STREET ADDRESS 3634 ASHLING DRIVE STREET ADDRESS 3534 LISMORE DRIVE CITY-ST-ZIP LAKELAND, FL 33803 CITY-ST-7IP LAKELAND, FL 33803 ☐ Delete IME Change X Addition HEIDEGGER, JIM NAME NAME ESPOSITO, MICHELLE STREET ADDRESS 3637 ASHLING DR. STREET ADDRESS 3616 LISMORE DRIVE CITY-ST-ZIP LAKELAND, FL 33803 CITY-ST-ZIP LAKELAND, FL 33803 TITLE ☐ Delete TITLE ■ Addition Change ALEXANDER, MIKE NAME NAME STREET ADDRESS 3447 ASHLING DR. STREET ADORESS LAKELAND, FL 33803 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED

Jun 08, 2005 8:00 am

Barbara E Schucht