


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 31, 2007 8:00 am
Secretary of State

05-31-2007 90001 008 ****61.25

DOCUMENT # N96000001892 1. Entity Name WATERFORD LAKES TRACT N-27 NEIGHBORHOOD ASSOCIATION, INC.																																																																																																																													
Principal Place of Business 453 MARK TWAIN BLVD ORLANDO, FL 32828 US			Mailing Address 453 MARK TWAIN BLVD ORLANDO, FL 32828 US																																																																																																																										
2. Principal Place of Business, No P.O. Box # 1801 Cook Avenue Suite, Apt. #, etc.		3. Mailing Address 1801 Cook Avenue Suite, Apt. #, etc.																																																																																																																											
City & State Orlando Florida Zip: 32806 Country: Orange		City & State Orlando Florida Zip: 32806 Country: Orange		4. FEI Number 59-3444772																																																																																																																									
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable																																																																																																																									
6. Name and Address of Current Registered Agent DON ASHER & ASSOCIATES, INC, 1801 COOK AVENUE ORLANDO, FL 32806			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																																																																																																										
8. 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. I am familiar with, and accept the obligations of registered agent.																																																																																																																													
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																																																													
Filing Fee is \$61.25 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees																																																																																																																									
Make check payable to Florida Department of State																																																																																																																													
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.																																																																																																																													
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																																																																																																																													
<small>Date Daytime Phone #</small>																																																																																																																													

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