2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N94000003762

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Entity Name: WATERFORD LAKES TRACT N-11 NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 1801 COOK AVENUE ORLANDO, FL 32806 **Current Mailing Address: New Mailing Address:** 1801 COOK AVENUE ORLANDO, FL 32806 FEI Number: 59-3256136 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ASHER, STEVEN D 1801 CÓOK AVENUE ORLANDO, FL 32806 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition DAWE, DOUG Name: Name: 12655 MARIBOU CIR. Address: Address: City-St-Zip: ORLANDO, FL 32828 City-St-Zip: Title: PD () Delete Title: (X) Change () Addition HETTENBACH, TOM Name: VANDERFORD, SUSAN Name: Address: 21 BATTLER ST. Address: 12660 MARIBOU CIRCLE City-St-Zip: ORLANDO, FL 32828 City-St-Zip: ORLANDO, FL 32828 Title: () Delete Title: VPD (X) Change () Addition SUMPTER, BRUCE TOLLIVER, LENA Name: Name: Address: 57 BATTLER STREET Address: 70 BATTLER STREET City-St-Zip: ORLANDO, FL 32828 City-St-Zip: ORLANDO, FL 32828 () Delete Title: Title: D (X) Change () Addition HILL, JOE Name: Name: HETTENBACH, TOM 12792 MARIBOU CIRCLE Address: Address: 21 BATTLER STREET City-St-Zip: ORLANDO, FL 32828 City-St-Zip: ORLANDO, FL 32828 Title: () Delete Title: () Change (X) Addition LOCKETT, WILLETTA Name: Name: 12696 MARIBOU CIRCLE Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32828

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: PATTI ACOCELLA LCAM 11/03/2009