UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000003124

1. WALDEN LAKE HOMEOWNERS ASSOCIATION, INC.

FILED

03 OCT 28 AM 11:33

SECRETARY OF STATE

☐ CHECK HERE IF MAKING CHANGES

Principal Place of Business	Mailing Address
C/O LANDMARK MANAGEMENT SERVICES 12323 S.W. 55TH STREET, STE. 1002 COOPER CITY, FL 33330	C/O LANDMARK MANAGEMENT SERVICES 12323 S.W. 55TH STREET, STE. 1002 COOPER CITY, FL 33330

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0680346 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LANDMARK MANAGEMENT SERVICES, INC. 12323 S.W. 55TH STREET, STE. 1002 COOPER CITY, FL 33330	Name Street Address (P.O. Box Number is Not Acceptable) 300024205183 City 10/28/03--01045--[illegible] 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 _____ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating)

FILE NOW: FEE IS $61.25
Initial or Amended UBR

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD CABALLERO, JORGE 20545 S.W. 5 STREET PEMBROKE PINES, FL 33029	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GRANDA, ROBERT 2031 SW 1 St Pembroke Pines FL 33029	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD RESILLEZ, IGNACIO 153 S.W. 204TH AVE. PEMBROKE PINES, FL 33029	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD VEGA, DENNIS 20461 SW 1 St Pembroke Pines FL 33029	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SMITH, HAWKY 20430 S.W. 1 ST. PEMBROKE PINES, FL 33029	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BRITTON, TERRY 20367 SW 3 St Pembroke Pines FL 33029	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD WHITTINGHAM, JUDITH 465 S. 205 AVE. PEMBROKE PINES, FL 33029	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SANCHEZ, BELKIS 20471 SW 1 St Pembroke Pines FL 33029	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOSTELLO-BACH, EVELYN 20440 S.W. 1 STREET PEMBROKE PINES, FL 33029	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D IGLESEAS, LUIS 20557 SW 2 St Pembroke Pines FL 33029	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Alex Garcia 1135 SW 204 Ave Pembroke Pines, FL 33029	☐ Change ☒ Addition

CR2E037 (10/02)

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.

SIGNATURE: _____ 9/10/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

7 11/3