

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N26073

**Entity Name:** WATERFORD PLANTATION HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Apr 15, 2021**  
**Secretary of State**  
**6961753206CC**

**Current Principal Place of Business:**

6252 CRESTWOOD DR  
TALLAHASSEE, FL 32311

**Current Mailing Address:**

5003 CRESTWOOD CT  
TALLAHASSEE, FL 32311 US

**FEI Number: 59-2985588**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CLARK, LORRAINE G  
5003 CRESTWOOD CT  
TALLAHASSEE, FL 32311 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:** LORRAINE G CLARK

04/15/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D, TREASURER  
Name CLARK, LORRAINE  
Address 5003 CRESTWOOD CT  
City-State-Zip: TALLAHASSEE FL 32311

Title DIRECTOR, PRESIDENT  
Name LAST, MAUREEN  
Address 6252 CRESTWOOD DR  
City-State-Zip: TALLAHASSEE FL 32311

Title DIRECTOR, VP  
Name LEWIS, DONALD  
Address 6278 LONGWOOD CT  
City-State-Zip: TALLAHASSEE FL 32311

Title DIRECTOR, SECRETARY  
Name SCHOLZ-JAFFE, KATHLEEN  
Address 6236 CRESTWOOD DR  
City-State-Zip: TALLAHASSEE FL 32311

*I hereby 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 all other like empowered.*

**SIGNATURE:** LORRAINE G CLARK

**DIRECTOR, TREASURER** 04/15/2021

Electronic Signature of Signing Officer/Director Detail

Date