

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000002938

**Entity Name:** WATERFORD LAKES TRACT N-32 NEIGHBORHOOD ASSOCIATION, INC.

**FILED  
Apr 06, 2019  
Secretary of State  
6451585997CC**

**Current Principal Place of Business:**

3906 WOODGLADE COVE  
WINTER PARK, FL 32792

**Current Mailing Address:**

3906 WOODGLADE COVE  
WINTER PARK, FL 32792 US

**FEI Number: 59-3203279**

**Certificate of Status Desired: No**

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

MGMT. SCIENCES INC  
3906 WOODGLADE COVE  
WINTER PARK, FL 32792 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

**Officer/Director Detail :**

Title D, SECRETARY  
Name SEBERGER, STEPHEN  
Address 508 KELLYGREEN DRIVE  
City-State-Zip: ORLANDO FL 32828

Title DIRECTOR, TREASURER  
Name MERCHANT, SAM  
Address 13527 EMERALDVIEW DRIVE  
City-State-Zip: ORLANDO FL 32828

Title D, VP  
Name TAYLOR, BRENT VICE PRESIDENT  
Address 501 KELLYGREEN DRIVE  
City-State-Zip: ORLANDO FL 32828

Title DIRECTOR, PRESIDENT  
Name STOFFLET, TERRY  
Address 13549 FORDWELL DR  
City-State-Zip: ORLANDO FL 32828

Title DIRECTOR  
Name HIGGINS, JOHN  
Address 512 KELLYGREEN DRIVE  
City-State-Zip: ORLANDO FL 32828

*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: TERRY STOFFLET**

**PRESIDENT**

**04/06/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date