

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **714401**

1. Entity Name

**WAVERLY MANOR APARTMENTS, INC.**



**FILED  
Feb 10, 2003 8:00 am  
Secretary of State**

02-10-2003 90443 044 \*\*\*\*61.25

**90022555**



CHECK HERE IF MAKING CHANGES

Principal Place of Business  
1421 COURT STREET  
STE. B  
CLEARWATER FL 33756

Mailing Address  
1421 COURT STREET  
STE. B  
CLEARWATER FL 33756

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 **65-0308795**

Applied For

Not Applicable

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

**6. Name and Address of Current Registered Agent**

**HERSEN, THOMAS  
1421 COURT ST.  
STE B  
CLEARWATER FL 33756**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

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**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**D  
HERSEM, THOMAS  
1421 COURT ST., STE B  
CLEARWATER FL 33756**

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**VPD  
DEMARCO, NICHOLAS A  
224 WAVERLY WAY #12  
CLEARWATER FL**

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**D  
LAWLER, JEROME  
224 WAVERLY WAY #5  
CLEARWATER FL**

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**D  
NEWHART, CHARLES  
224 WAVERLY WAY #10  
CLEARWATER FL**

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**D  
LOWDER, MILVIN  
224 WAVERLY WAY #4  
CLEARWATER FL 33756**

Delete

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 REQUIRED**

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)