NONPROFIT CORPORATION ANNUAL REPORT

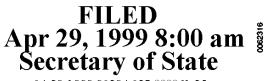
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**



04-29-1999 90294 027 ****61.25

1. Corporation	VIEN # /284//			
	ATER MANOR ASSOCIATION	N. INC.		
LDGLW	HEIT HANDIT MODOUMING	1) 1107		
Principal Place	e of Business	Mailing Address		
23188 FREEDO	M AVENUE ARBOR FL ¹ 33980	23188 FREEDOM AVENUE CHARLOTTE HARBOR FL 335	gen	
ONANGOTTE II	ANDON FEISSSOO	CHARLOTTE THRIDOTTE SO.		
		2a. Mailing Address		Date Incorporated or Qualifed
 -	ace of Business	26 Maining Address		12/26/1973
Suite, Apt.	#. etc.	Suite, Apt. #, etc.		4. FEI Number Applied For
22		27		59-1831066 Not Applicable
City & State	9	· City & State	-	5. Certificate of Status Desired \$8.75 Additional
23		28		Les Kadalian
Zip	Country	Zip	Country	6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
24	9. Name and Address of Current	29 30	<u> </u>	Trust Fund Contribution Added to Fees 10. Name and Address of New Registered Agent
	9. Name and Address of Current	r vedistered videric	81 Name	
OH KINOTA	N IOCEDIA		Cat	herine L Gerace
PILKINGTON, JOSEPH 22333 EDGEWATER DR.			Address (P.O. Box Number is Not Acceptable) 88 Freedom Avenue	
D-3	GEWAIER DR.		83	
	TE HARBOR FL 33980		84 City	85 Zip Code
O, I, a LEO			Cha	rlotte Harbor FL 33980
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered				
agent. I a	m familiar with, and accept the obligat	ions of, Section 617.0503, Florida	a Statutes.	4/10/00
SIGNATURE	(cither of	Derau		4/19/99
12.	Signature, typed or printed name of registered agen OFFICERS AN	· · · · · · · · · · · · · · · · · · ·	egistered Agent signature r	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	4.4 TITL 5	President Thange Addition
NAME	PILKINGTON, JOSEPH	l		William T Cumler
STREET ADDRESS	22333 EDGEWATER DR., D-4	7	1.3 STREET ADDRESS	22333 Edgewater Drive D-7
CITY-ST-ZIP	CHARLOTTE HBR, FL 00000		1.4 CITY-ST-ZIP	
TITLE	VP i	□ DELETE	2.1 TITLE	Charlotte Harbor FL 33990 □ Addition Vice Pres
NAME	SMITH, CATHERINE		2.2 NAME	J Robert Keyser
STREET ADDRESS	22333 EDGEWATER DR B-3		2.3 STREET ADDRESS	22333 Edgewater Drive B-2 Charlotte Harbor FL 33980
CITY-ST-ZIP	CHARLOTTE HBR, FL 00000	Modulete		
TITLE	ST CLUMED	DELETE	3.1 TITLE	Secretary Y ^{change} Daudoon Janice P Moore
NAME	WILLIAM CUMLER			22333 Edgewater Drive B-8
STREET ADDRESS	22333 EDGEWATER DR D-7 CHARLOTTE HBR, FL 00000			Charlotte Harbor FL 33980
CITY-ST-ZIP	D D	DELETE	4.4 7070.00	f Change ☐ Addition
NAME	CAY, E	7		Treasurer Vaughn E Phillips
STREET ADDRESS	201 CEDAR GROVE DR			22333 Edgewater Drive E-2
CITY-ST-ZIP	CAESAREA ON 0		4.4 CITY-ST-ZIP	Charlotte Harbor FL 33980
TITLE	D	DELETE	5.1 TITLE	Director Shange Addition
NAMÉ	ANTHONY DEFILIPPO	•	5.2 NAME	Beverly A Burch-Stanley
STREET ADDRESS	22333 EDGEWATER DR B-5			22333 Edgewater Drive B-6
CITY-ST-ZIP	CHARLOTTE HARBOR FL	AV _{DELETE}	5.4 CITY-ST-ZIP 6.1 TITLE	Charlotte Harbor FL 33980 ☐ Change ☐ Addition
NAME TO A SOLUTION	LK STEP STATE	DELETE	6.1 MILE 6.2 NAME	
· ·	A CONSTRUCT WATER		6.3 STREET ADDRESS	
STREET ADDRESS	i i		S AND ALLERS LED DISCOUL	1

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE