

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

FILED
May 29, 2003 8:00 am
Secretary of State

05-29-2003 90134 023 ****61.25

DOCUMENT # 747839

1. Entity Name

WALK-IN-WATER LAKE ESTATES PROPERTY OWNERS ASSOCIATION, INC.



Principal Place of Business

**9330 PINE TREE DR
LAKE WALES FL 33853
US**

Mailing Address

**9330 PINETREE DR
LAKE WALES FL 33853
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2075837**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BACON, MARGUERITE W.
9151 CYPRESSWOOD DR
LAKE WALES FL 33853**

7. Name and Address of New Registered Agent

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 **VP** ☐ Delete
NAME **FREDERICK, JOHN**
STREET ADDRESS **9180 CYPRESSWOOD DR**
CITY-ST-ZIP **LAKE WALES FL 33853**

TITLE **D** ☒ Delete
NAME **WATSON, RICK J**
STREET ADDRESS **8825 OAKWOOD DR**
CITY-ST-ZIP **LAKE WALES FL 33898**

TITLE **P** ☐ Delete
NAME **FORMAZ, RICHARD**
STREET ADDRESS **9310 LIME DR.**
CITY-ST-ZIP **LAKE WALES FL 33853**

TITLE **D** ☒ Delete
NAME **CARDEN, BILLY**
STREET ADDRESS **9629 OAKWOOD DR**
CITY-ST-ZIP **LAKE WALES FL 33853**

TITLE **D** ☒ Delete
NAME **KAVALEK, BRENDA**
STREET ADDRESS **8918 OAKWOOD DR**
CITY-ST-ZIP **LAKE WALES FL 33853**

TITLE **TD** ☐ Delete
NAME **BACON, MAGUERITE**
STREET ADDRESS **9151 CYPRESSWOOD DR**
CITY-ST-ZIP **LAKE WALES FL 33853**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **Di Russo, Regina** ☐ Change ☒ Addition
NAME **9649 Oakwood Dr.**
STREET ADDRESS **Lake Wales, FL 33898-6223**
CITY-ST-ZIP

TITLE **H.D. Taylor** ☐ Change ☒ Addition
NAME **9131 Oakwood Dr.**
STREET ADDRESS **Lake Wales, FL 33898-**
CITY-ST-ZIP

TITLE **Sheila Dorgeloh** ☐ Change ☒ Addition
NAME **9437 Pinetree Dr.**
STREET ADDRESS **Lake Wales, FL 33898**
CITY-ST-ZIP

TITLE **Doug Vaughn** ☐ Change ☒ Addition
NAME **9530 Pinetree Dr.**
STREET ADDRESS **Lake Wales, FL 33898**
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Marguerite Bacon
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

863-696-3889

CR2E037 (10/02)

attachment

80122028
#747839

5/25/03

To: Division of Corporations

Re: Document #747839

Please forgive the tardiness
of this remittance.

Thank you,
Marguerite Baum (Treas.)

WALK-IN-WATER-LAKE-ESTATES
PROPERTY OWNERS ASSOC., INC.
9330 PINETREE DR.
LAKE WALES, FL 33898