NONPROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCU 1. Corporatio	MENT # 754851	1 (4)				
WATERWOOD COMMUNITY ASSOCIATION, INC.						
Principal Place of Business		Mailing Address		1 (0017) (000) 01111 01007 (010) 0101 41(014)	Di ASDEI DIDII AIAIS AIAIS AIDIE AIDIE	
300 WATERWOOD DR. YALAHA FL 34797		300 WATERWOOD DR. YALAHA FL 34797				
				3. Date Incorporated or Qualified 10/28/1980	3a. Date of Last Report 04/26/1995	
2. Principal P:	ace of Business	2a. Mailing Address		4. FEI Number 59-2630867	Applied For Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #,		Suite, Apt. #, etc.			\$8.75 Additional	
22		27		Certificate of Status Desired	Fee Required	
City & State	е	City & State		 Election Campaign Financing Trust Fund Contribution 	□ \$5.00 May Be Added to Fees	
Zip 24	Country 25	Zρ	Country	8. This corporation has liability for inte	angible tax under s. 199.032,	
24]	9. Name and Address of Current		10	Florida Statutes 10. Name and Address of New Reg	Yes Dano	
B1 Name						
JENKINS, HAROLD M 82 Stroot Addre			BROPHY JOHN F.			
104 PEPPERTREE COURT				t Address (P.O. Box Number is Not Acceptable) 103 WATERWOOD DRIVE		
YALAHA FL 34797			83	YALAHA, FL 3479	7	
			84 City		FL 85 Zip Code	
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 am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.						
SIGNATURE 4-4-96						
12.	Signatore, typed or printed name of registered agent a		Registered Agent signature re	equired when reinstating; ADDITIONS/CHANGES TO OFFICE	DATE	
TITLE	PD	DADELETE	1.1 TITLE	PD	Change X Addition	
NAME	JENKINS, HAROLD		1.2 NAME		• •	
STREET ADDRESS	104 PEPPERTREE COURT			BROPHY, JOHN F.	Ξ	
CITY-ST-ZIP -	YALAHAN FL SD	□ DELETE		ALAHA, FL 34797		
NAME	HAIRE, JUDITH F		2.1 TITLE 2.2 NAME	MAURICE FRY VD	Change 🙀 Addition	
STREET ADDRESS	107 WATERWOOD DRIVE		2.3 STREET ADDRESS	103 ACACIA POINT		
CITY-ST-ZIP	YALAHA FL		2. 4 CITY - ST - ZIP	YALAHA, FL 34797		
TITLE	D	DELETE	3.1 TITLE	Б	Change Addition	
NAME	BITNER, LOIS H.		3 2 NAME	D ROBERT ROSS		
STREET ADDRESS	106 ACACIA POINT		3 3 STREET ADDRESS	601 CLUSTERWOOD DRI	170	
CITY-ST-ZIP	YALAHA FL	₹70ccccc	3 4. CHTY-ST-ZIP	OUL CHOSTERWOOD DRI	·	
TITLE NAME	TD Hahn, Michael S	DELETE	4 1 TITLE		, YA LACHLINGE Addition	
STREET ADDRESS	305 WATERWOOD DRIVE		4 2 NAME 4 3 STREET ADDRESS			
CITY-\$T-ZIP	YALAHA FL		44 CITY-ST-ZIP			
TITLE	D	DELETE	51 TITLE	D	Change X Addition	
NAME	RUSSELL, CHARLES	· -	5 2 NAME	D PHYLLIS SMITH		
STREET ADDRESS	102 TIMBER LANE		5 3 STREET ADDRESS	108 GREENTREE LANE		
CITY-ST-ZIP	YALAHA FL		5 4 CITY-ST-ZIP	YALAHA, FL " '3-		
TITLE	VD	(≯ DELETE	6 1 TITLE	D 3	Change Addition	
NAME	VAANDERING, ARNOLD		6 2 NAME	MICHAEL HAHN		
STREET ADDRESS	203 WATERWOOD DR		6 3 STREET ADDRESS	305 WATERWOOD DRIV	E	
CITY-ST-ZIP 14. I do hereb	YALAHA FL y certify that the information supplied w	ith this filing is voluntarily furnishe	6 4 CITY-ST-ZIP	VALADA, ET 24707		

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.

SIGNATURE:

TED NAME OF SIGNING OFFICER OR DIRECTOR

TED NAME OF SIGNING OFFICER OR DIRECTOR

TED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)