


FILE NOW: FILING FEE IS \$61.25

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May 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 754851 (4)
1. Corporation Name
WATERWOOD COMMUNITY ASSOCIATION, INC.



Principal Place of Business 300 WATERWOOD DR. YALAHUA FL 34797	Mailing Address 300 WATERWOOD DR. YALAHUA FL 34797
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3. Date Incorporated or Qualified 10/28/1980
4. FEI Number 59-2630867
Applied For <input type="checkbox"/> Yes <input type="checkbox"/> No

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent MILES, GEORGE 106 TIMBER LANE YALAHUA FL 34797	
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10. Name and Address of New Registered Agent	
81 Name Murray McMahon	85 Zip Code 34797
82 Street Address (P.O. Box Number is Not Acceptable) 104 Timber Lane	
83	
84 City Yalaha	85 Zip Code FL 34797

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 617.0508, Florida Statutes.

SIGNATURE Murray McMahon, President *Murray McMahon* **4/28/98**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE PD	<input checked="" type="checkbox"/> DELETE
NAME MILES, GEORGE	
STREET ADDRESS 106 TIMBER LANE	
CITY-ST-ZIP YALAHUA FL	
TITLE D	<input type="checkbox"/> DELETE
NAME CERAVOLO, NORMAN	
STREET ADDRESS 310 WATERWOOD DRIVE	
CITY-ST-ZIP YALAHUA FL	
TITLE D	<input type="checkbox"/> DELETE
NAME BITNER, LOIS H.	
STREET ADDRESS 106 ACACIA POINT	
CITY-ST-ZIP YALAHUA FL	
TITLE D	<input checked="" type="checkbox"/> DELETE
NAME ENGLISH, ELIZABETH	
STREET ADDRESS 108 WATERWOOD DRIVE	
CITY-ST-ZIP YALAHUA FL	
TITLE VD	<input checked="" type="checkbox"/> DELETE
NAME SMITH, PHYLLIS	
STREET ADDRESS 108 GREENTREE LANE	
CITY-ST-ZIP YALAHUA FL	
TITLE D	<input checked="" type="checkbox"/> DELETE
NAME SCHULTZ, WILMA	
STREET ADDRESS 501 WATERWOOD DRIVE	
CITY-ST-ZIP YALAHUA FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE Director S/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME Mary Whitaker	
1.3 STREET ADDRESS 105 Timber Lane	
1.4 CITY-ST-ZIP Yalaha, FL 34797	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.1 TITLE Director D	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME Peg Iverson	
2.3 STREET ADDRESS 103 Clusterwood Drive	
2.4 CITY-ST-ZIP Yalaha, FL 34797	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.1 TITLE Director P/D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME Murray McMahon	
3.3 STREET ADDRESS 104 Timber Lane	
3.4 CITY-ST-ZIP Yalaha, FL 34797	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME SMITH, PHYLLIS	
5.3 STREET ADDRESS 108 GREENTREE LANE	
5.4 CITY-ST-ZIP YALAHUA, FL 34797	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE V/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME DONALD F. KILLIAN	
6.3 STREET ADDRESS 101 ACACIA POINT	
6.4 CITY-ST-ZIP YALAHUA, FL 34797	

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.

SIGNATURE *Murray McMahon*

CR2E037 (10/97)