

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2002 8:00 am
Secretary of State

03-05-2002 90045 024 ****61.25

DOCUMENT # 755900

1. Entity Name

WAVERLY PLACE HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**495 E WAVERLY PLACE
 VERO BEACH FL 32960**

**495 E WAVERLY PLACE
 VERO BEACH FL 32960**

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 **59-2334634**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TYLOR, JAMES III
 2770 INDIAN RIVER BLVD SUITE 501
 VERO BEACH FL 32960**

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.

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
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME	JARRETT, PAMELA	☐ Delete
STREET ADDRESS	360 E WAVERLY PLACE #4B	
CITY-ST-ZIP	VERO BEACH FL 32960	
TITLE NAME	PELLIGRINO, JIM	☒ Delete
STREET ADDRESS	54 REM DR	
CITY-ST-ZIP	MERIDEN CT 06450	
TITLE NAME	HOWDER, RANDY	☒ Delete
STREET ADDRESS	320 E WAVERLY PLACE #7A	
CITY-ST-ZIP	VERO BEACH FL 32960	
TITLE NAME	RENEE, RENZI	☐ Delete
STREET ADDRESS	340A E WAVERLY PLACE	
CITY-ST-ZIP	VERO BEACH FL 32960	
TITLE NAME	SALATINO, DOROTHY	☐ Delete
STREET ADDRESS	12 WALLACE ST	
CITY-ST-ZIP	STAMFORD CT 06307	
TITLE NAME	EBNER, MARY	☒ Delete
STREET ADDRESS	360C E WAVERLY PLACE	
CITY-ST-ZIP	VERO BEACH FL 32960	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	Ira Lerman	☐ Change ☒ Addition
STREET ADDRESS	475 A E. Waverly Pl.	
CITY-ST-ZIP	VERO BEACH, FL 32960	
TITLE NAME	Scott Ratsey	☐ Change ☒ Addition
STREET ADDRESS	320 D E. Waverly Pl.	
CITY-ST-ZIP	VERO BEACH, FL 32960	
TITLE NAME	Bob Anderson	☐ Change ☒ Addition
STREET ADDRESS	340 D E. Waverly Pl.	
CITY-ST-ZIP	VERO BEACH, FL 32960	
TITLE NAME	Mike Bermingham	☐ Change ☒ Addition
STREET ADDRESS	320 A E. Waverly Pl.	
CITY-ST-ZIP	VERO BEACH, FL 32960	
TITLE NAME	Mike Williams	☐ Change ☒ Addition
STREET ADDRESS	370 B E. Waverly Pl.	
CITY-ST-ZIP	VERO BEACH, FL 32960	
TITLE NAME		☐ Change ☐ Addition
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:

Renée Renzi
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/02
 Date

561-562-4824
 Daytime Phone #

CR2E037 (9/01)