## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## Mar 26, 2007 8:00 am **Secretary of State DOCUMENT #755900** 03-26-2007 90073 028 \*\*\*\*61.25 WAVERLY PLACE HOMEOWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address 495 E WAVERLY PLACE 495 E WAVERLY PLACE 1 U U J J I J I VERO BEACH, FL 32960 VERO BEACH, FL 32960 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03022007 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Number Applied For 59-2334634 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TYLOR, JAMES III 2770 INDIAN RIVER BLVD SUITE 501 Street Address (P.O. Box Number is Not Acceptable) VERO BEACH, FL 32960 Zip Code FL 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 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to Due by May 1, 2007 Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delete TITLE NAME HOWDER, CAROL NAME 335 B 320 E. WAVERLY PLACE #7A STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32960 veno CITY-ST-7IP 32960 TITLE ☐ Addition Delete Change TITLE. SHOCK, SHARI NAME NAME STREET AODRESS 310 E WAVERLY PL 9C STREET ADDRESS CITY-ST-7IP VERO BEACH, FL 32960 CITY-ST-ZIP TITLE Delete - Addition TITLE MCWILLIAM, JACQUELINE NAME NAME 1 Place 475 E WAVERLY PLACE 7A STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32960 CITY-ST-ZIP TITLE Delete TITLE Addition BAIRD, BUBS NAME NAME 475 E. WAVERLY PLACE #7B STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32960 CITY-ST-ZIP ☐ Delete TITLE 2 Change ☐ Addition TITLE SWANSON, NANCY NAME 408 E. WAVERLY PLACE STREET ADDRESS STREET ADDRESS 403 E ware VERO BEACH, FL 32960 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE Change ☐ Addition

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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.

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

PAWLOWSKI, LUEY

330 A E WAVERLY PLACE 8A

VERO BEACH, FL 32960

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-110-07

FILED

Daytime Phone #