

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2005 8:00 am
Secretary of State

01-13-2005 90005 023 ****61.25

DOCUMENT # 766344

1. Entity Name
**WALDEN LAKE FAIRWAY ESTATES I PROPERTY
OWNER'S ASSOCIATION, INC.**



Principal Place of Business
**2004 COUNTRY CLUB CT
PLANT CITY, FL 33566 US**

Mailing Address
**2004 COUNTRY CLUB CT
PLANT CITY, FL 33566 US**

30004404



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01072005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-2272160

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**LEPINE, ARTHUR J
2004 COUNTRY CLUB COURT
PLANT CITY, FL 33566**

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

**Filing Fee is \$81.25
Due by May 1, 2005**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME CASTAGNO, JOSEPH J
STREET ADDRESS 2003 COUNTRY CLUB CT
CITY-ST-ZIP PLANT CITY, FL 33566

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

TITLE V ☐ Delete
NAME KULYK, BARBARA J
STREET ADDRESS 2001 COUNTRY CLUB CT
CITY-ST-ZIP PLANT CITY, FL 33566

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

TITLE T ☐ Delete
NAME WALDEN, SELINDA
STREET ADDRESS 2005 COUNTRY CLUB CT
CITY-ST-ZIP PLANT CITY, FL 33566

TITLE ☒ Change ☐ Addition
NAME **WALDEN, SELINDA**
STREET ADDRESS **2006 COUNTRY CLUB CT**
CITY-ST-ZIP **PLANT CITY, FL 33566**

TITLE TD ☐ Delete
NAME LEPINE, ART
STREET ADDRESS 2004 COUNTRY CLUB CT
CITY-ST-ZIP PLANT CITY, FL 33566

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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:

Arthur J. Lepine

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-7-05

813-754-1919

Date

Daytime Phone #

ARTHUR J. LEPINE