2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2008 08:00 AM
Secretary of State

DOCUMENT # 768620

1. Entity Name
WATERFORD BAY CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
203 ROAD TO WATERFORD BAY MELBOURNE, FL 32951 US	203 ROAD TO WATERFORD BAY MELBOURNE, FL 32951 US

03022008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2466546
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MILFORD, BARBARA
204 ROAD TO WATERFORD BAY
MELBOURNE BEACH, FL 32951

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PT
NAME	MILFORD, BARBARA
STREET ADDRESS	204 THE ROAD TO WATERFORD BAY
CITY-ST-ZIP	MELBOURNE BEACH, FL 32951
TITLE	VP
NAME	MILFORD, BARBARA
STREET ADDRESS	204 ROAD TO WATERFORD BAY
CITY-ST-ZIP	MELBOURNE BEACH, FL 32951
TITLE	D
NAME	STEELE, VAL
STREET ADDRESS	216 ROAD TO WATERFORD BAY
CITY-ST-ZIP	MELBOURNE BEACH, FL 32951
TITLE	P
NAME	GRANNING, RON
STREET ADDRESS	208 RD TO WATERFORD BAY
CITY-ST-ZIP	MELBOURNE BEACH, FL 32951
TITLE	SD
NAME	GRANNING, JOAN
STREET ADDRESS	208 RD TO WATERFORD BAY
CITY-ST-ZIP	MELBOURNE BEACH, FL 32951
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000848220
03/20/08-80008-019 61.25

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12. I hereby certify that the information supplied with this filing 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.

SIGNATURE: B. Milford BARBARA MILFORD 03-2-08 321-725-0286
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #