

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000005689

FILED  
Aug 05, 2003  
Secretary of State

**Entity Name:** WATERFORD ACADEMY, INCORPORATED

**Current Principal Place of Business:**

7687 S.W. 103RD LOOP  
OCALA, FL 34476

**New Principal Place of Business:**

**Current Mailing Address:**

7687 S.W. 103RD LOOP  
OCALA, FL 34476

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PARIS, CATHERINE  
7687 S.W. 103RD LOOP  
OCALA, FL 34476

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: PARIS, CATHERINE  
Address: 7687 S.W. 103RD LOOP  
City-St-Zip: OCALA, FL 34476

Title: D ( ) Delete  
Name: PARIS, PHYLLIS  
Address: 3977 SEDGEWICK AVE.  
City-St-Zip: BRONX, NY 10463

Title: D ( ) Delete  
Name: PARIS, PATRICK  
Address: 3977 SEDGEWICK AVE.  
City-St-Zip: BRONX, NY 10463

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CATHERINE PARIS

D

08/05/2003

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date