## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Sep 04, 2007 8:00 am Secretary of State

DOCUMENT # N0100000184  1. Entity Name THE SHORES AT WATERLEFE HOMEOWNERS ASSOCIATION, INC.					2 <b>retary of</b> 04-2007 90040 014 **			
995 FISH HOOK COVE SHORES HOA		Mailing Address 995 FISH HOOK COVE SHORES HOA BRADENTON, FL 34212		HIRCHIEF DIK BRIEF	ITOKI BOKI BOKI BOKI BOKI BOKI BOKI			
Principal Place of Business - No P.O. Box #     3.		3. Mailing Address	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		07062007 Chg-NP CR2E037 (12/06)				
City & State		City & State		4. FEI Number 65-110715	0		plied For t Applicable	
Zip	Country	Zip	Country	5. Certificate of St		8.75 Add e Required		
	6. Name and Address of Curren		7. Name and Address of New Registered Agent					
LANG, PA 995 FISH I SHORES I	HOOK COVE			Street Address (P.O., Box, Number is Not Acceptable)				
BRADENTON, FL 34212			City	Bradenton FL Zip Gode 3H212				
 		denton	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 trile if applicable. (NOTE: Registured Agent signature required when reinstating)  DATE								
D	Filing Fee is \$61.25 ue by September 14, 2007	9. Election Camp Trust Fund Co		\$5.00 May Be Added to Fees  Make check payable to Florida Department of State				
10.	OFFICERS AND C	IRECTORS	11.		ES TO OFFICERS AND DIRE	CTORS IN	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LANG, PAUL J 995 FISH HOOK COVE BRADENTON, FL 34212	☐ Delete		easurer will Lang		Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DOBBINS, MICHAEL 995 FISH HOOK COVE BRADENTON, FL 34212	Delete	STREET ADDRESS \ \ \ \ \	bert Hoffm 402 Riverb adenton Fl	an ank Terr	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HEGWER, LESLIE 995 FISH HOOK COVE BRADENTON, FL 34212	Delete	TITLE VP NAME NO C STREET ADDRESS VOC				Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delate	TITLE NAME STREET ADDRESS CITY-ST-ZIP		]	Change	Addition	

12. I hereby certify that the information supplied with this filing does not qualify to the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and faccurate 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 flustee employeered 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 employeered.

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Delete

8 26/07

Daytime Phone #

Change

☐ Addition