

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000219

FILED  
Mar 16, 2009  
Secretary of State

Entity Name: WATERMILL MASTER ASSOCIATION, INC.

## Current Principal Place of Business:

414 OLD HARD ROAD  
SUITE 201  
ORANGE PARK, FL 32003

## New Principal Place of Business:

414 OLD HARD ROAD  
SUITE 201  
FLEMING ISLAND, FL 32003

## Current Mailing Address:

414 OLD HARD ROAD  
SUITE 201  
ORANGE PARK, FL 32003

## New Mailing Address:

414 OLD HARD ROAD  
SUITE 201  
FLEMING ISLAND, FL 32003

FEI Number: 59-3714845

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SMITH, SHIRLEY C RA  
414 OLD HARD ROAD  
SUITE 201  
ORANGE PARK, FL 32003 US

## Name and Address of New Registered Agent:

SMITH, SHIRLEY C RA  
414 OLD HARD ROAD  
SUITE 201  
FLEMING ISLAND, FL 32003 US

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:

03/16/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MARTIN, THOMAS R  
Address: 8019 LEAFCREST DR  
City-St-Zip: JACKSONVILLE, FL 32247488

Title: VD ( ) Delete  
Name: AMES, RICHARD K  
Address: 930 PROSPERITY LAKE DR  
City-St-Zip: JACKSONVILLE, FL 32244

Title: SD ( ) Delete  
Name: COCKAYNE, BARBARA  
Address: 9412 PROSPERITY LAKE DR  
City-St-Zip: JACKSONVILLE, FL 32244

Title: TD ( ) Delete  
Name: MASK, LYNDA  
Address: 9400 PROSPERITY LAKE DR  
City-St-Zip: JACKSONVILLE, FL 32244

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## 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:

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

Title: D ( ) Change (X) Addition  
Name: HARRISON, MOSES  
Address: 9268 SHARNBROOK LANE  
City-St-Zip: JACKSONVILLE, FL 32444

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SHIRLEY SMITH

RA

03/16/2009

Electronic Signature of Signing Officer or Director

Date