

ANNUAL REPORT

DOCUMENT # N03000003033

1. Entity Name
WALDO ASSOCIATION OF RESIDENTS AND
MERCHANTS, INC.FILED
Apr 13, 2005 8:00 am
Secretary of State

04-13-2005 90057 050 ****61.25

Principal Place of Business
POST OFFICE BOX 185
WALDO, FL 32694Mailing Address
13958 NE 140TH LANE
WALDO, FL 32694

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04112005 Chg-NP CR2E037 (10/03)

4. FEI Number
14-1896997Applied For
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SOWELL, FRED C
13958 NE 140TH LANE
WALDO, FL 32694

7. Name and Address of New Registered Agent

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 \$61.25
Due by May 1, 20059. 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

TITLE DP ☐ Delete
NAME WISE, LINDA
STREET ADDRESS BOX 201 U
CITY-ST-ZIP WALDO, FL 32694TITLE DS ☐ Delete
NAME DODD, PENNY
STREET ADDRESS PO BOX 459
CITY-ST-ZIP WALDO, FL 32694TITLE DT ☐ Delete
NAME ENCK, ANN
STREET ADDRESS PO BOX 45
CITY-ST-ZIP WALDO, FL 32694TITLE D ☐ Delete
NAME HALL, CHUCK
STREET ADDRESS HWY 301
CITY-ST-ZIP WALDO, FL 32694TITLE D ☐ Delete
NAME BAY, THELMA
STREET ADDRESS 18101 US 301
CITY-ST-ZIP WALDO, FL 32694TITLE D ☐ Delete
NAME BLAKEWOOD, STEVE
STREET ADDRESS 17805 US HWY 301
CITY-ST-ZIP WALDO, FL 32694

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DS ☐ Change ☒ Addition
NAME Whitmire, Carolyn
STREET ADDRESS 16704 NE 124th Avenue
CITY-ST-ZIP Waldo, FL 32694TITLE DT ☒ Change ☐ Addition
NAME DuBois, James J.
STREET ADDRESS P O Box 186
CITY-ST-ZIP Waldo, FL 32694TITLE DV ☐ Change ☒ Addition
NAME Crowe, Ruth
STREET ADDRESS P O Box 17
CITY-ST-ZIP Waldo, FL 32694TITLE D ☒ Change ☐ Addition
NAME Enck, Ann
STREET ADDRESS P O Box 45
CITY-ST-ZIP Waldo, FL 32694TITLE D ☒ Change ☐ Addition
NAME Dodd, Penny
STREET ADDRESS P. O. Box 459
CITY-ST-ZIP Waldo, FL 32694TITLE ☐ 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:

Linda Wise (President)