

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 03, 2007 8:00 am
Secretary of State

04-03-2007 90019 018 ****61.25

DOCUMENT # N03000007339

1. Entity Name

**WATERWAY PATIO HOMES CONDOMINIUM ASSOCIATION,
INC., PHASE II**



Principal Place of Business

**6349 SAGEWOOD LANE
SEBRING FL 33876**

Mailing Address

**PO BOX 65
LORIDA FL 33857**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

56-2400008

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BROWER, MARIE A
6349 SAGEWOOD LANE
SEBRING FL 33876**

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 resigning)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

9. 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME WILLIARD, DAVID
STREET ADDRESS 203 CLUBHOUSE COURT
CITY- ST- ZIP SEBRING FL 33876

TITLE PD ☒ Change ☐ Addition
NAME Willard DAVID
STREET ADDRESS 203 Clubhouse Court
CITY- ST- ZIP Sebring FL 33876

TITLE VPD ☐ Delete
NAME BOHANON, LUTHER
STREET ADDRESS 220 CLUBHOUSE COURT
CITY- ST- ZIP SEBRING FL 33876

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE STD ☐ Delete
NAME SINK, JACK
STREET ADDRESS 224 POINT PLACE
CITY- ST- ZIP ATHENS GA 30605

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE D ☐ Delete
NAME YODER, KEITH
STREET ADDRESS 1672 EMERSON DR. SE
CITY- ST- ZIP PALM BAY FL 32909

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE D ☐ Delete
NAME BURGOYNE, JOSEPH R
STREET ADDRESS 216 CLUBHOUSE COURT
CITY- ST- ZIP SEBRING FL 33876

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Willard David

Willard David PD

3-22-2007

863-655-2946

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #