2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

SIGNATURE:

Apr 21, 2004 8:00 am Secretary of State DOCUMENT # N03419 1. Entity Name 04-21-2004 90051 032 ****70.00 THE WATERWAYS HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 4105 RAILROAD AVE PORT CHARLOTTE FL 33953 4105 RAILROAD AVE PORT CHARLOTTE FL 33953 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) Applied For City & State City & State 4. FEI Number 59-2588277 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BOYD, JOYCE R 4105 RAILROAD RD PORT CHARLOTTE FL 33953 City 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 DATE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State 10 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete TITLE ☐ Change Addition Donald Burnham 14470 Worth While Rd SCHUMACHER, WILLIAM NAME NAME 14454 WORTHWHILE RD STREET ADDRESS STREET ADDRESS + Charlotte PORT CHARLOTTE FL 33953 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition BOYD, AL NAME NAME 4523 BROWNIE RD STREET ADDRESS STREET ADDRESS PORT CHARLOTTE FL 33981 CITY-ST-7IP CITY-ST-7IP ☐ Change TITLE ☐ Delete TITLE Addition BOYD, JOYCE - ----NAME NAME 4523 BROWNIE RD STREET ADDRESS STREET ADDRESS PORT CHARLOTTE FL 33953 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITI F Change TITLE ☐ Addition POWERS, ROBERT NAME NAME 14430 WORTHWHILE RD STREET ADDRESS STREET ADDRESS PORT CHARLOTTE FL 33953 CITY-ST-ZIP CITY-ST-ZIP TITLE M Delete TITLE ___ Change Addition ROLAND, JANET NAME PO BOX 380626 STREET ADDRESS STREET ADDRESS MURDOCK FL 33938 CITY-ST-ZIP CITY-ST-ZIP DBF ☐ Delete TITLE ☐ Change ☐ Addition HERNANDEZ, JERRY NAME NAME PO BOX 380626 STREET ADDRESS STREET ADDRESS MURDOCK FL 33938 CITY-ST-ZIP 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.

FILED