

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000967

FILED  
Apr 23, 2012  
Secretary of State

**Entity Name:** WALKERS GLEN PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

6415 WALKERS GLEN DR  
LAKELAND, FL 33813

**New Principal Place of Business:**

**Current Mailing Address:**

6415 WALKERS GLEN DR  
LAKELAND, FL 33813

**New Mailing Address:**

**FEI Number:** 65-1217464

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WOODS, LYNN ELLEN  
6415 WALKERS GLEN DR  
LAKELAND, FL 33813 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** MELVILLE, DAVID  
**Address:** 6490 WALKERS GLEN COURT  
**City-St-Zip:** LAKELAND, FL 33813

**Title:** DVP  
**Name:** VERPLANCK, HOLLY  
**Address:** 6498 WALKERS GLEN DR  
**City-St-Zip:** LAKELAND, FL 33813

**Title:** TD  
**Name:** WOODS, LYNN ELLEN  
**Address:** 6415 WALKERS GLEN DR  
**City-St-Zip:** LAKELAND, FL 33813

**Title:** SD  
**Name:** SILVERMAN, SANDRA S  
**Address:** 6478 WALKERS GLEN DR  
**City-St-Zip:** LAKELAND, FL 33813

I hereby 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 all other like empowered.

**SIGNATURE:** LYNN ELLEN WOODS

D/T

04/23/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date