

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001884

FILED  
Feb 06, 2012  
Secretary of State

**Entity Name:** WATERSIDE AT LA CITA HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

632 WATERSIDE CIR  
TITUSVILLE, FL 32780

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 76  
TITUSVILLE, FL 32780

**New Mailing Address:**

**FEI Number:** 20-0797243

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EVANS, JOHN H  
1702 S. WASHINGTON AVENUE  
TITUSVILLE, FL 32780 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: P  
Name: FOOSE, RALPH G  
Address: 632 WATERSIDE CIR  
City-St-Zip: TITUSVILLE, FL 32780

Title: S  
Name: PETTY, ROBERT  
Address: 652 WATERSIDE CIR  
City-St-Zip: TITUSVILLE, FL 32780

Title: T  
Name: MCRAE, CARLA  
Address: 401 WATERSIDE CIR  
City-St-Zip: TITUSVILLE, FL 32780

Title: D  
Name: BRENNAN, EDWARD  
Address: 501 WATERSIDE CIR  
City-St-Zip: TITUSVILLE, FL 32780

Title: D  
Name: LAMONTHE, JOHN  
Address: 662 WATERSIDE CIR  
City-St-Zip: TITUSVILLE, FL 32780

Title: D  
Name: MCRAE, JILLIAN  
Address: 491 WATERSIDE CIR  
City-St-Zip: TITUSVILLE, FL 32780

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: RALPH G FOOSE

PRES

02/06/2012

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

\_\_\_\_\_  
Date