

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14717

FILED
Jan 26, 2009
Secretary of State

Entity Name: WATERFORD PATIO HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

15010 S. WATERFORD DR.
MAIL BOX ONLY
DAVIE, FL 33331

New Principal Place of Business:

Current Mailing Address:

15010 S. WATERFORD DR.
MAIL BOX ONLY
DAVIE, FL 33331

New Mailing Address:

FEI Number: 59-2684913 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROUGH, CHADROW & LEVINE, P.A.
1900 N. COMMERCE PARKWAY
WESTON, FL 33326 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 () Delete
Name: ANDERSON, RICHARD
Address: 15160 BRISTOL LANE
City-St-Zip: DAVIE, FL 33331

Title: V () Delete
Name: BELL, DONALD
Address: 15170 BRIGHTON LANE
City-St-Zip: DAVIE, FL 33331

Title: T () Delete
Name: DE CHRISTOPHER, JOHN
Address: 15061 BRIGHTON LN
City-St-Zip: DAVIE, FL 33331

Title: S () Delete
Name: MEADOWS, KYLE
Address: 14860 NEW CASTLE LN
City-St-Zip: DAVIE, FL 33331

Title: D () Delete
Name: PICO, GEORGE
Address: 15031 BRIGHTON LN
City-St-Zip: DAVIE, FL 33331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: DECHRISTOPHER, JOHN
Address: 15061 BRIGHTON LN
City-St-Zip: DAVIE, FL 33331

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN DECHRISTOPHER

T

01/26/2009

Electronic Signature of Signing Officer or Director

_____ Date