



2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2006 8:00 am
Secretary of State

02-24-2006 90008 027 ****61.25

DOCUMENT # N26050 1. Entity Name LAKE WAUNATTA COVE HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 4319 MANDY CT WINTER PARK, FL 32792			Mailing Address 4319 MANDY CT WINTER PARK, FL 32792		
2. Principal Place of Business 7643 WAUNAQUA DR. Suite, Apt. #, etc.		3. Mailing Address 7643 WAUNAQUA DR. Suite, Apt. #, etc.		<div style="font-size: 1.5em; font-weight: bold; margin-bottom: 10px;">40017648</div>  <div style="display: flex; justify-content: space-between; font-size: 0.8em;"> 01252006 Chg-NP CR2E037 (11/05) </div>	
City & State WINTER PARK FL		City & State WINTER PARK FL		4. FEI Number 59-2946168	
Zip 32792		Zip 32792		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FULLER, JERRY 7502 WAUNAQUA DRIVE WINTER PARK, FL 32792				7. Name and Address of New Registered Agent 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 <u><i>Jerry D Fuller Pres.</i></u> <small>Signature, typed or printed name of registered agent and not if applicable.</small>				DATE <u>1-30-06</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>	
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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 NAME STREET ADDRESS CITY-ST-ZIP	D GIEBERT, TROY 7510 WAUNAQUA DRIVE WINTER PARK, FL 32792	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KREIDLER, DWAYNE 7526 WAUNAQUA DR WINTER PARK, FL 32792	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FULLER, JERRY 7520 WAUNAQUA DR WINTER PARK, FL 32792	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLARK, RAY 7620 WAUNAQUA DRIVE WINTER PARK, FL 32792	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STRIDE, JEFF 7643 WAUNAQUA DRIVE WINTER PARK, FL 32792	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	<input type="checkbox"/> Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u><i>Jerry D Fuller Pres.</i></u> 1-30-06 407-678-1219 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		