
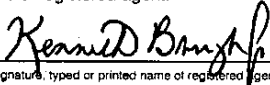
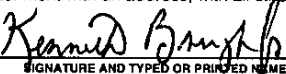


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2005 8:00 am
Secretary of State

04-04-2005 90098 032 ****61.25

DOCUMENT # N26073			
1. Entity Name WATERFORD PLANTATION HOMEOWNERS ASSOCIATION, INC.			
Principal Place of Business 6268 CRESTWOOD DR TALLAHASSEE, FL 32311 US		Mailing Address 6280 CRESTWOOD DR TALLAHASSEE, FL 32311 US	
2. Principal Place of Business		3. Mailing Address 6260 Crestwood Dr	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State Tallahassee FL	
Zip	Country	Zip	Country
		32311	USA
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
BAUGH, KENNETH JR 6280 CRESTWOOD DR TALLAHASSEE, FL 32311		Name Kenneth Baugh, Jr. Street Address (P.O. Box Number is Not Acceptable) 6260 Crestwood Dr City Tallahassee FL Zip Code 32311	
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 		Kenneth Baugh, Jr. Treasurer (NOTE: Registered Agent signature required when reinstating)	
DATE 4-1-05			
Filing Fee is \$61.25 Due by May 1, 2005		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	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CLARK, MIKE	NAME	
STREET ADDRESS	5003 CRESTWOOD CT	STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE, FL 32311	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHALAKO, PAUL	NAME	Shalako, Paul
STREET ADDRESS	6267 CRESTWOOD DR	STREET ADDRESS	6268 Crestwood Dr
CITY-ST-ZIP	TALLAHASSEE, FL 32311	CITY-ST-ZIP	Tallahassee FL 32311
TITLE	D <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAUGH, KENNETH JR.	NAME	DT. Baugh, Kenneth Jr.
STREET ADDRESS	6280 CRESTWOOD DR	STREET ADDRESS	6260 Crestwood Dr
CITY-ST-ZIP	TALLAHASSEE, FL 32311	CITY-ST-ZIP	Tallahassee FL 32311
TITLE	DS <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEWIS, DONALD	NAME	
STREET ADDRESS	6278 LONGWOOD CT	STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE, FL 32311	CITY-ST-ZIP	
TITLE	DP <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PRUYN, BOB	NAME	
STREET ADDRESS	6283 CRESTWOOD DR	STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE, FL 32311	CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REDDOCH, ELIZABETH	NAME	
STREET ADDRESS	6288 CRESTWOOD DR.	STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE, FL 32311	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.			
SIGNATURE: 		Kenneth Baugh Jr. Date 4-1-05 (850) 488-4870	

50033818



03312005 Chg-NP CR2E037 (10/03)

4. FEI Number
59-2985588

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$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

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NAME	CLARK, MIKE
STREET ADDRESS	5003 CRESTWOOD CT
CITY-ST-ZIP	TALLAHASSEE, FL 32311
TITLE	D <input type="checkbox"/> Delete
NAME	SHALAKO, PAUL
STREET ADDRESS	6267 CRESTWOOD DR
CITY-ST-ZIP	TALLAHASSEE, FL 32311
TITLE	D <input type="checkbox"/> Delete
NAME	BAUGH, KENNETH JR.
STREET ADDRESS	6280 CRESTWOOD DR
CITY-ST-ZIP	TALLAHASSEE, FL 32311
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NAME	LEWIS, DONALD
STREET ADDRESS	6278 LONGWOOD CT
CITY-ST-ZIP	TALLAHASSEE, FL 32311
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STREET ADDRESS	6283 CRESTWOOD DR
CITY-ST-ZIP	TALLAHASSEE, FL 32311
TITLE	D <input checked="" type="checkbox"/> Delete
NAME	REDDOCH, ELIZABETH
STREET ADDRESS	6288 CRESTWOOD DR.
CITY-ST-ZIP	TALLAHASSEE, FL 32311

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Shalako, Paul
STREET ADDRESS	6268 Crestwood Dr
CITY-ST-ZIP	Tallahassee FL 32311
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	
CITY-ST-ZIP	

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SIGNATURE:  **Kenneth Baugh Jr.**

Date **4-1-05** (850) 488-4870

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #