

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27268

FILED  
May 01, 2007  
Secretary of State

**Entity Name:** WALDEN PLACE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

%ANTHONY JUSEVITCH  
2041 ATASCADERO CT  
TALLAHASSEE, FL 32317

**New Principal Place of Business:**

**Current Mailing Address:**

%ANTHONY JUSEVITCH  
2041 ATASCADERO CT  
TALLAHASSEE, FL 32317

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

JUSEVITCH, ANTHONY  
2041 ATASCADERO CT  
TALLAHASSEE, FL 32317 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: VP ( ) Delete  
Name: WHITE, RON  
Address: 2017 ATASCADERO CT  
City-St-Zip: TALLAHASSEE, FL 32317

Title: S ( ) Delete  
Name: BUSHARIS, BARBARA  
Address: 2033 ATASCADERO CT  
City-St-Zip: TALLAHASSEE, FL 32317

Title: T ( ) Delete  
Name: DAVIDSON, ROBERT  
Address: 7048 ATASCADERO CT  
City-St-Zip: TALLAHASSEE, FL 32317

Title: P ( ) Delete  
Name: JUSEVITCH, ANTHONY  
Address: 2041 ATASCADERO CT  
City-St-Zip: TALLAHASSEE, FL 32317

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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: ANTHONY R. JUSEVITCH

P

05/01/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date