

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27651

FILED
Feb 17, 2009
Secretary of State

Entity Name: WATERFORD CROSSING HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2189 CLEVELAND ST.
STE 225
CLEARWATER, FL 33765 US

New Principal Place of Business:

Current Mailing Address:

2189 CLEVELAND ST.
STE 225
CLEARWATER, FL 33765 US

New Mailing Address:

FEI Number: 59-2901125

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEIGHTON, LENNARD A.
2189 CLEVELAND ST.
STE 225
CLEARWATER, FL 33765 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: TD () Delete
Name: HAHN, SAM
Address: 2721 MCNAIR DR.
City-St-Zip: PALM HARBOR, FL 34683

Title: PD () Delete
Name: HORTSMAN, BETTY
Address: 2676 CHALLENGER DR.
City-St-Zip: PALM HARBOR, FL

Title: VPD () Delete
Name: CAMPBELL, WAYNE
Address: 2696 MCNAIR DRIVE
City-St-Zip: PALM HARBOR, FL 34683

Title: SD () Delete
Name: DAVIS, TERRY
Address: 2751 CHALLENGER DRIVE
City-St-Zip: PALM HARBOR, FL 34683

Title: D () Delete
Name: BALDINO, AL
Address: 2700 CHALLENGER DR
City-St-Zip: PALM HARBOR, FL 34686

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:

Title: D (X) Change () Addition
Name: PAOLINI, MARY K
Address: 2739 CHALLENGER DR.
City-St-Zip: PALM HARBOR, FL 34686

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: BETTY HORTSMAN

P

02/17/2009

Electronic Signature of Signing Officer or Director

Date