

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 24, 2006 8:00 am**  
**Secretary of State**

03-24-2006 90029 004 \*\*\*\*61.25

**DOCUMENT # N34970**

1. Entity Name

**WATERSEGE PROPERTY OWNERS ASSOCIATION OF  
LAKE PLACID, INC.**



Principal Place of Business

**124 HUNTLEY OAKS BLVD  
LAKE PLACID FL 33852  
US**

Mailing Address

**124 HUNTLEY OAKS BLVD  
LAKE PLACID FL 33852  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

**59-2987205**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**KLECZEK, DAVID  
115 HUNTLEY OAKS BLVD.  
LAKE PLACID FL 33852**

7. Name and Address of New Registered Agent

Name **Davis, John**

Street Address (P.O. Box Number is Not Acceptable)

**117 WatersEdge Ln.**

City **Lake Placid,**

**FL**

Zip Code  
**33852-7053**

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2006**

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

TITLE **P** ☒ Delete  
NAME **KLECZEK, DAVID**  
STREET ADDRESS **115 HUNTLEY OAKS BLVD**  
CITY-ST-ZIP **LAKE PLACID FL 33852**

TITLE **VPD** ☒ Delete  
NAME **DAVIS, JOHN**  
STREET ADDRESS **117 WATEREDGE LN**  
CITY-ST-ZIP **LAKE PLACID FL 33852**

TITLE **SD** ☒ Delete  
NAME **CLINARD, ANNE**  
STREET ADDRESS **105 WATERSEGE LANE**  
CITY-ST-ZIP **LAKE PLACID FL 33852**

TITLE **T** ☐ Delete  
NAME **KRIVOS, RICHARD**  
STREET ADDRESS **144 HUNTLEY OAKS BLVD**  
CITY-ST-ZIP **LAKE PLACID FL 33852**

TITLE **P** ☒ Delete  
NAME **KLECZEK, DAVID**  
STREET ADDRESS **115 HUNTLEY OAKS BLVD.**  
CITY-ST-ZIP **LAKE PLACID FL 33852**

TITLE **D** ☒ Delete  
NAME **SHIRLEY, DEBBIE**  
STREET ADDRESS **104 HUNTLEY OAKS BLVD**  
CITY-ST-ZIP **LAKE PLACID FL 33852**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☒ Change ☐ Addition  
NAME **Davis, John**  
STREET ADDRESS **117 WatersEdge Ln.**  
CITY-ST-ZIP **Lake Placid, FL 33852-7053**

TITLE **V** ☐ Change ☒ Addition  
NAME **Bevis, Mike**  
STREET ADDRESS **192 Huntley Oaks Blvd**  
CITY-ST-ZIP **Lake Placid, FL 33852-7053**

TITLE **S** ☐ Change ☒ Addition  
NAME **Jones, Jane**  
STREET ADDRESS **160 Huntley Oaks Blvd.**  
CITY-ST-ZIP **Lake Placid, FL 33852-7053**

TITLE **D** ☐ Change ☒ Addition  
NAME **McCullough, Debbie**  
STREET ADDRESS **200 Huntley Oaks Blvd.**  
CITY-ST-ZIP **Lake Placid, FL 33852-7053**

TITLE **D** ☐ Change ☒ Addition  
NAME **Gibbs, Bob**  
STREET ADDRESS **132 Huntley Oaks Blvd.**  
CITY-ST-ZIP **Lake Placid, FL 33852-7053**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: **Richard Krivos** (Richard Krivos) Treasurer

1-24-06

863-699-2555