2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N36183

Electronic Signature of Registered Agent

TI FILED
Oct 28, 2009
Secretary of State

Entity Name: WAVERLY HUNDRED HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 4839 SW 148TH AVENUE PMB 306 **DAVIE, FL 33330 New Mailing Address: Current Mailing Address:** 4839 SW 148TH AVENUE PMB 306 **DAVIE, FL 33330** FEI Number: 65-0318329 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BACKER, KEITH F BACKER LAW FIRM, P.A. 400 SOUTH DIXIE HWY. SUITE 420 BOCA RATON, FL 33432 US 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:

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

(X) Change () Addition () Delete KLEIN, JONATHAN O'CONNOR, VAL Name: Name: 15842 STONETOWER STREET Address: 6140 HAWKES BLUFF AVE. Address: City-St-Zip: **DAVIE. FL 33331** City-St-Zip: **DAVIE. FL 33331** Title: () Delete Title: () Change () Addition FRANETIC, TINA Name: Name: Address: 6452 ABOTTS MILL AVE Address: City-St-Zip: **DAVIE, FL 33331** City-St-Zip: Title: () Delete Title: (X) Change () Addition HOLLINGER, ALLAN Name: TYLER, LEVI Name: 15620 GAUNTLET HALL MANOR Address: Address: 6310 GAUNTLET HALL LANE City-St-Zip: **DAVIE. FL 33330** City-St-Zip: **DAVIE. FL 33331** Title: () Delete Title: () Change () Addition Name: MILONE, FRANK Name: 15821 NORTH SEDGEWYCK CIR Address: Address: City-St-Zip: **DAVIE, FL 33331** City-St-Zip: Title: () Delete Title: () Change () Addition AYALA, JOHN Name: Name: 6341 GAUNTLAT HALL LANE Address: Address: City-St-Zip: **DAVIE, FL 33331** City-St-Zip: Title: () Delete Title: () Change (X) Addition MUSSER, PAUL Name: Name: Address: Address: 15820 NORTH SEDGEWYCK CIR **DAVIE, FL 33331** City-St-Zip: 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: VAL O'CONNOR T/S 10/28/2009