FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 APR 26 AM 11:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N41484 (9)

1. Corporation Name

WATERFORD LAKES TRACT N-6 NEIGHBORHOOD ASSOCIATION, INC.

Principal Place of Business	Mailing Address
52 E SOUTH STR ORLANDO FL 32801 US	52 E SOUTH STR ORLANDO FL 32801 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/31/1990	3a. Date of Last Report: 04/22/1994
4. FEI Number: 59-3053821	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
DON ASHER & ASSOCIATES INC 52 E SOUTH STR ORLANDO FL 32801	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	P/D	☒ Change ☐ Addition
NAME	HOOD, MARGARET	1.2 NAME	Wright, Dennis	
STREET ADDRESS	12845 FORESTEDGE CIR	1.3 STREET ADDRESS	12822 Forestedge Circle	
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	Orlando, Fl 32828	
TITLE	VD	2.1 TITLE	V/D	☒ Change ☐ Addition
NAME	WILLIS, DAVID	2.2 NAME	Condrey, Devin	
STREET ADDRESS	12938 FORESTEDGE CIR	2.3 STREET ADDRESS	12830 Forestedge Circle	
CITY-ST-ZIP	ORLANDO FL	2.4 CITY-ST-ZIP	Orlando, Fl 32828	
TITLE	STD	3.1 TITLE	T/D	☒ Change ☐ Addition
NAME	IANDOLI, PAUL	3.2 NAME	Koach, John	
STREET ADDRESS	12826 FORESTEDGE CIR	3.3 STREET ADDRESS	801 Bloomingdale Drive	
CITY-ST-ZIP	ORLANDO FL	3.4 CITY-ST-ZIP	Orlando, Fl 32828	
TITLE	D	4.1 TITLE	S/D	☒ Change ☐ Addition
NAME	LAUBY, KEITH	4.2 NAME	Prout, Ottilie	
STREET ADDRESS	845 LAURELCREST DR	4.3 STREET ADDRESS	12719 Forestedge Circle	
CITY-ST-ZIP	ORLANDO FL	4.4 CITY-ST-ZIP	Orlando, Fl 32828	
TITLE	D	5.1 TITLE	D	☒ Change ☐ Addition
NAME	KOACH, JOHN J	5.2 NAME	Frezen, Jack	
STREET ADDRESS	801 BLOOMINGDALE DR	5.3 STREET ADDRESS	851 Laurelcrest Drive	
CITY-ST-ZIP	ORLANDO FL	5.4 CITY-ST-ZIP	Orlando, Fl 32828	
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this form is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Devin Condrey - Vice President 4-19-95 Date

Work 422-9866
Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0003790