

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR 14 AM 9:20

DOCUMENT # N45238

(5)

1. Corporation Name

WATERFORD II, INC.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/20/1991	3a. Date of Last Report 03/03/1994
4. FEI Number 65-0296349	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 13500 WORTHINGTON WAY BONITA SPRINGS FL 33923	2a. Mailing Address 13500 WORTHINGTON WAY BONITA SPRINGS FL 33923
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Country
24. Zip	25. Country
29. Zip	30. Country

9. Name and Address of Current Registered Agent

**BRUGGER, JOHN N.
600 FIFTH AVENUE SOUTH
SUITE 210
NAPLES FL 33940-4997**

10. Name and Address of New Registered Agent

81. Name Debra Aldridge	85. Zip Code 33923
82. Street Address (P.O. Box Number is Not Acceptable) Worthington Country Club	
83. 13500 Worthington Way	
84. City Bonita Springs	FL

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 *John Basile* DATE **3-30-95**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DP	NAME SCHMITT, RONALD	1.1 TITLE D/V/T	1.2 NAME campbell, Gary
STREET ADDRESS 13500 WORTHINGTON WAY		1.3 STREET ADDRESS 13500 Worthington Way	
CITY - ST - ZIP BONITA SPRINGS FL		1.4 CITY - ST - ZIP Bonita Springs, FL 33923	
TITLE DVT	NAME BASILE, JOHN	2.1 TITLE D/P	2.2 NAME Basile, John
STREET ADDRESS 13500 WORTHINGTON WAY		2.3 STREET ADDRESS 13500 Worthington Way	
CITY - ST - ZIP BONITA SPRINGS FL		2.4 CITY - ST - ZIP Bonita Springs, FL 33923	
TITLE DVS	NAME WESELI, ROGER	3.1 TITLE D/V/S	3.2 NAME Riley, David
STREET ADDRESS 13500 WORTHINGTON WAY		3.3 STREET ADDRESS 13500 Worthington Way	
CITY - ST - ZIP BONITA SPRINGS FL		3.4 CITY - ST - ZIP Bonita Springs, FL 33923	
TITLE	NAME	4.1 TITLE	4.2 NAME
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	NAME	5.1 TITLE	5.2 NAME
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	NAME	6.1 TITLE	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 filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE: *John Basile* DATE: **3-30-95** DAYTIME PHONE: **813-495-0244**