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 9:36

DOCUMENT # **N47906** **(5)**

1. Corporation Name
WATERFORD III, INC.

Principal Place of Business	Mailing Address
13500 WORTHINGTON WAY BONITA SPRINGS FL 33923	13500 WORTHINGTON WAY BONITA SPRINGS FL 33923

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/17/1992
3a. Date of Last Report: 03/03/1994
4. FEI Number: 65-0345041 ☐ 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

BRUGGER, JOHN N.
600 FIFTH AVE S
SUITE 210
NAPLES FL 33940

10. Name and Address of New Registered Agent

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

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: Debra Aldridge — 3-30-95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DVS	1.1 TITLE	D/V/S	☒ Change ☒ Addition
NAME	CRAYCRAFT, HENRY	1.2 NAME	Caudill, Robert	
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	DP	2.1 TITLE		☐ Change ☐ Addition
NAME	JOHNSON, ROGER	2.2 NAME		
STREET ADDRESS	13500 WORTHINGTON WAY	2.3 STREET ADDRESS		
CITY-ST-ZIP	BONITA SPRINGS FL	2.4 CITY-ST-ZIP		
TITLE	DVT	3.1 TITLE	D/V/T	☐ Change ☐ Addition
NAME	LAMKIN, GEORGE	3.2 NAME	Lamkin, George	
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		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
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 filing 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: Roger Johnson — 3/21/95 — 813-495-0244
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Roger Johnson

d018681