01-19-2005 90005 032 ****61.00
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2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
05 JAN 31 PM 3:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
50003574

DOCUMENT # N93000003333

1. Entity Name
WALDEN CIRCLE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
6822 WALDEN CIRCLE TALLAHASSEE, FL 32317 US	6822 WALDEN CIRCLE TALLAHASSEE, FL 32317 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

01132005 Chg-NP CR2E037 (10/03)

4. FEI Number 59-3190178 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

O'MEARA, CYNTHIA A
6706 WALDEN CIRCLE
TALLAHASSEE, FL 32317

7. Name and Address of New Registered Agent

Name PHILIP D. BROWN
Street Address (P.O. Box Number is Not Acceptable) 6822 WALDEN CIRCLE
City TALLAHASSEE, FL **FL** Zip Code 32317

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 _____ PHILIP D. BROWN 1/13/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LEWIS, JACK 6790 WALDEN CIR TALLAHASSEE, FL 32317	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD HOLLAR, BILL 6762 WALDEN CIRCLE TALLAHASSEE, FL 32317	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CARPENTER, MARIE 6757 WALDEN CIR TALL, FL 32317	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD O'MEARA, CYNTHIA 6706 WALDEN CIR TALL, FL 32317	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BROWN, PHILIP D. 6822 WALDEN CIRCLE TALLAHASSEE, FL 32317	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: _____ PHILIP D. BROWN 1/13/05 (850) 386-6184
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #