

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003333

FILED  
Feb 06, 2012  
Secretary of State

**Entity Name:** WALDEN CIRCLE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

6790 WALDEN CIRCLE  
TALLAHASSEE, FL 32317 US

**New Principal Place of Business:**

**Current Mailing Address:**

6790 WALDEN CIRCLE  
TALLAHASSEE, FL 32317 US

**New Mailing Address:**

**FEI Number:** 59-3190178

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHNEIDER, SHEILA  
6790 WALDEN CIR  
TALLAHASSEE, FL 32317 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** SCHNEIDER, SHEILA  
**Address:** 6790 WALDEN CIRCLE  
**City-St-Zip:** TALLAHASSEE, FL 32317

**Title:** VP  
**Name:** MEEHAN, GARY  
**Address:** 6733 WALDEN CIRCLE  
**City-St-Zip:** TALLAHASSEE, FL 32317

**Title:** TD  
**Name:** HOLLAR, THERESA  
**Address:** 6762 WALDEN CIRCLE  
**City-St-Zip:** TALLAHASSEE, FL 32317 US

I hereby 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 all other like empowered.

**SIGNATURE:** SHEILA E SCHNEIDER

PRES

02/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date