

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2008 8:00 am
Secretary of State

02-01-2008 90027 032 ****61.25

DOCUMENT # N95000003124

1. Entity Name
WALDEN LAKE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**C/O POINTE MANAGEMENT GROUP, INC.
75 NE 6 AVENUE -SUITE# 206
DELRAY BEACH, FL 33483**

Mailing Address
**C/O POINTE MANAGEMENT GROUP, INC.
75 NE 6 AVENUE -SUITE# 206
DELRAY BEACH, FL 33483**

4000-



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01042008 Chg-NP CR2E037 (12/06)

4. FEI Number
65-0680346

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**POINTE MANAGEMENT GROUP, INC.
75 NE 6 AVENUE SUITE 206
DELRAY BEACH, FL 33483**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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, 2008**

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

TITLE ☒ ~~DELETE~~ ☐ Delete
NAME **GRANDA, ROBERT**
STREET ADDRESS **2031 SW 1 STREET**
CITY-ST-ZIP **PEMBROKE PINES, FL 33029**

TITLE ☒ ~~DELETE~~ ☐ Delete
NAME **VEGA, DENNIS**
STREET ADDRESS **20461 SW 1 STREET**
CITY-ST-ZIP **PEMBROKE PINES, FL 33029**

TITLE ☒ ~~DELETE~~ ☐ Delete
NAME **BRITTON, TERRY**
STREET ADDRESS **20367 SW 3 ST**
CITY-ST-ZIP **PEMBROKE PINES, FL 33029**

TITLE ☒ ~~DELETE~~ ☐ Delete
NAME **MADISON, LARRY**
STREET ADDRESS **267 SW 206 AVE**
CITY-ST-ZIP **PEMBROKE PINES, FL 33029**

TITLE ☒ ~~DELETE~~ ☐ Delete
NAME **FISCHER, WALTER**
STREET ADDRESS **20382 SW 3 STREET**
CITY-ST-ZIP **PEMBROKE PINES, FL 33029**

TITLE ☒ ~~DELETE~~ ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ ~~DELETE~~ ☐ Change ☐ Addition
NAME **TO ROBERT GRANDA**
STREET ADDRESS **"Same"**
CITY-ST-ZIP **20381 SW 1 STREET, Pembroke Pines, FL 33029**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ ~~DELETE~~ ☐ Change ☐ Addition
NAME **VPD**
STREET ADDRESS **TERRY BRITTON**
CITY-ST-ZIP **"Same"**

TITLE ☒ ~~DELETE~~ ☐ Change ☐ Addition
NAME **SO**
STREET ADDRESS **LARRY MADISON**
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ ~~DELETE~~ ☐ Change ☐ Addition
NAME **PETER COLLINS**
STREET ADDRESS **221 SW 203 Avenue**
CITY-ST-ZIP **PEMBROKE PINES, FL 33029**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

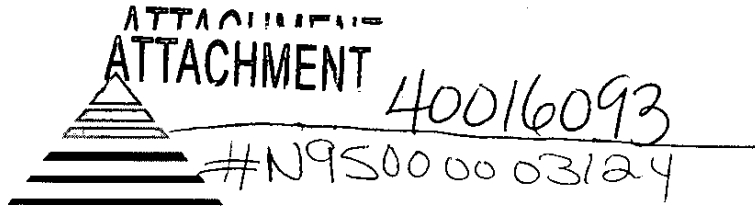
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-7-08

561-274-3031

Date

Daytime Phone #



POINTE MANAGEMENT GROUP, INC.

75 N.E. 6TH AVE. SUITE 206
DELRAY BEACH, FLORIDA 33483
(561) 274-3031 BOCA / DELRAY
TOLL FREE 1-800-535-6730
FAX (561) 274-3065

WALDEN LAKE HOMEOWNERS ASSOCIATION

BOARD OF DIRECTORS

2007/2008

PRESIDENT -WALTER FISCHER-20382 SW 3 STREET

PEMBROKE PINES, FL. 33029

(H)954-443-0887, (C)786-271-4976

VICE PRESIDENT -TERRY BRITTON-20367 SW 3 STREET

PEMBROKE PINES, FL. 33029

(H)954-442-8580,(C)954-445-4685

SECRETARY -LARRY MADDISON-267 SW 206 AVENUE

PEMBROKE PINES, FL. 33029

(H)954-432-7504, (C)954-309-3952

TREASURER-ROBERT GRANDA- 20381 SW 1 STREET

PEMBROKE PINES, FL. 33029

(H)954-430-9988,(C)954-529-8642,(F)954-838-4763

DIRECTOR -PETER COLLINS-221 SW 203 AVENUE

PEMBROKE PINES, FL. 33029

(H)954-254-8209