


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 30, 2007 8:00 am**  
**Secretary of State**

03-30-2007 90125 044 \*\*\*\*61.25

<b>DOCUMENT # N97000000156</b>	
<b>1. Entity Name</b>	
WATERFORD AT THE CASCADES HOMEOWNERS' ASSOCIATION, INC.	

<b>Principal Place of Business</b>	<b>Mailing Address</b>
6601 CASCADES ISLE BLVD. BOYNTON BEACH FL 33437	6601 CASCADES ISLE BLVD. BOYNTON BEACH FL 33437

<b>2. Principal Place of Business - No P.O. Box #</b>	<b>3. Mailing Address</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

<b>City &amp; State</b>	<b>City &amp; State</b>
Zip	Country

<b>4. FEI Number</b>	<b>Applied For</b>
65-0780821	Not Applicable
<b>5. Certificate of Status Desired</b>	<b>\$8.75 Additional Fee Required</b>
<input type="checkbox"/>	



1st MOORE CR2E037 (10/06)

<b>6. Name and Address of Current Registered Agent</b>
ST JOHN, CORE & LEMME, PA 1601 FORUM PLACE WEST PALM BEACH FL 33401

<b>7. Name and Address of New Registered Agent</b>
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) DATE \_\_\_\_\_

<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2007</b>	<b>9. Election Campaign Financing Trust Fund Contribution.</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	<b>Make Check Payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS	
<b>TITLE</b>	<input type="checkbox"/> Delete
<b>NAME</b>	GLASS, KEN
<b>STREET ADDRESS</b>	6855 LISMORE AVE.
<b>CITY - ST - ZIP</b>	BOYNTON BEACH FL
<b>TITLE</b>	<input type="checkbox"/> Delete
<b>NAME</b>	VPD
<b>STREET ADDRESS</b>	FRISHER, DAVE
<b>CITY - ST - ZIP</b>	6571 SHERBROOK DR BOYNTON BEACH FL 33437
<b>TITLE</b>	<input type="checkbox"/> Delete
<b>NAME</b>	SD
<b>STREET ADDRESS</b>	ASHKENAS, DOROTHY
<b>CITY - ST - ZIP</b>	11562 CLARIA DR BOYNTON BEACH FL 33437
<b>TITLE</b>	<input type="checkbox"/> Delete
<b>NAME</b>	PD
<b>STREET ADDRESS</b>	BLATT, MERVIN
<b>CITY - ST - ZIP</b>	7013 CASHMAINE AVE BOYNTON BEACH FL 33437
<b>TITLE</b>	<input type="checkbox"/> Delete
<b>NAME</b>	TD
<b>STREET ADDRESS</b>	DUKOFF, BURTON
<b>CITY - ST - ZIP</b>	6640 MAYBROOK RD BOYNTON BEACH FL 33437
<b>TITLE</b>	<input type="checkbox"/> Delete
<b>NAME</b>	D
<b>STREET ADDRESS</b>	COLEMAN, MARLENE
<b>CITY - ST - ZIP</b>	1999 LISMORE AVE. BOYNTON BEACH FL 33437

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 the empowered

**SIGNATURE:** \_\_\_\_\_ **3/19/07** **561-424-0466**

# ATTACHMENT

40045131

#197066880156

## WATERFORD HOMEOWNERS ASSOCIATION

### BOARD OF DIRECTORS

January 24, 2007

**Merv Blatt, President**

7013 Castlemaine Ave.  
Boynton Beach, FL 33437

740-9801

[mblatt@adelphia.net](mailto:mblatt@adelphia.net)

**Dave Frisher, Vice President**

6571 Sherbrook Drive  
Boynton Beach, FL 33437

733-1423

[gmafrish@aol.com](mailto:gmafrish@aol.com)

**Marlene Coleman, Secretary**

6999 Lismore Avenue  
Boynton Beach, FL 33437

736-2010

[marlabubbie@aol.com](mailto:marlabubbie@aol.com)

**Burt Dukoff, Treasurer**

6640 Maybrook Road  
Boynton Beach, FL 33437

733-1677

[bbduke@adelphia.net](mailto:bbduke@adelphia.net)

**Dorothy Ashkenas, Director**

11562 Claria Drive  
Boynton Beach, FL 33437

740-0036

[dotherb64@aol.com](mailto:dotherb64@aol.com)

**Ken Glass, Director**

6855 Lismore Ave.  
Boynton Beach, FL 33437

733-2789

[ken@glass-family.com](mailto:ken@glass-family.com)

**Buddy Sachs, Director**

6966 Castlemaine Avenue  
Boynton Beach, FL 33437

369-2118

[budsjazz@adelphia.net](mailto:budsjazz@adelphia.net)