2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9700003961. 1. Entity Name WAVERLEE WOODS HOMEOWNERS ASSOCIATION, INC.				FILED May 24, 2000 8:00 am Secretary of State			
1330 PALMETTO AVE -WINTER PARK FE 92709	-C/O MID-PLORIDA PROP M -P.O. BOX 182150 - CASSELBERRY FL 32718-210 -US		1 10011101	SIE (BIIL 1881) 88(II 68II) 88I	51 80 151 90187 3111 8 18 11 9 8 1	(D) 1101 1001	
2. Principal Place of Business 5025 South U.S. Hwy. To Suite, Apt. #, etc.	1-92 3. Mailing Address 1-92 5. Mid-Florid Suite, Apt. #, etc.	, ,	'	DO NOT WRITE I	N THIS SPACE		
City & State	5025 South V	1.S. Hwy. 17-	4. FEI Numbe	er	Ap	plied For	
Casselberry FL	<u>Casselberry</u>	5 FL Country		59-3457794	\$8.75 Add	ot Applicable	
32707	32707	- Country		of Status Desired	Fee Require		
6. Name and Address of C	Current Registered Agent	Name 🔒	7. Name and	Address of New Reg	istered Agent		
GODWIN, LARRY 1330 PALMETTO AVE WINTER PARK FL 32789	۔ بید معتوب	502 City 0	ess (P.O. Box Number Mid-Floria	ris Not Acceptable) A Cop. U.S. Hw	Mgmt. 17-92	e	
8. The above named entity submits this state	ment for the purpose of changing its r		sistered agent, or not	h. in the state of Florida		707	
SIGNATURE SIgnature, typed or printed name of register FILE NOW: FEE IS \$61.25	9. Election Campaign Trust Fund Contribu	ution. \square	\$5.00 May Be Added to Fees	Make C Depa	Check Payable to		
	AND DIRECTORS Mark Delete	11.		ANGES TO OFFICERS	AND DIRECTORS IN Change	10 X Addition {	
NAME GODWIN, LARRY STREET ADDRESS CITY-ST-ZIP WINTER PARK FL 32789	∠ Delete	NAME STREET ADDRESS 4	Loy, Kendro 91 Lynn S Oviedo, FL	4. 327 <i>65</i>	Change		
TITLE NAME STREET ADDRESS CITY-ST-ZIP D GODWIN, ROBERT H 1330 PALMETTO AVE WINTER PARK FL 32789	Delete	STREET ADDRESS	ook, Crain 40 August Viedo, Fl	rine Ct.	☐ Change	⊠ Addition	
TITLE D NAME MELOON, MELISSA STREET ADDRESS 1330 PALMETTO AVE	X Delete	TITLE NAME STREET ADDRESS 5	hiel, Day 20 Lynn	i.d 54.	☐ Change	Addition	
CITY-ST-ZIP WINTER PARK FL 32789 TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS 1	umphrey 860 Ashi Viedo, FL	32765 Michelle and Trail	☐ Change	Addition	
TITLE NAME STREET ADDRESS	☐ Delete	NAME STREET ADDRESS	iuld, Davi 250 Hazel	d tine Nation	□ Change	Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	□ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	rlando, F	L 37877	☐ Change	Addition	
12. I hereby certify that the information supplindicated on this report of supplemental rof the corporation or the receiver or trusts changed, or on an attachment with an ad-	lied with this titing does not qualify for graph is true and accurate and that me and the property of the prop	the exemption stated by signature shall have as required by Chapte	in Section 1.19.07(3)(the same legal effect or 617, Florida Statute	i), Florida Statutes. I fu t as if made under oat s; and that my name a	rther certify that the in; that I am an officer oppears in Block 10 or	nformation or director Block 11 if	