## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000004052

FILED Jan 17, 2005 Secretary of State

Entity Name: SPRING MEADOW AT WALDEN LAKE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1706 BROOKSTONE WAY 2705 SPRING MEADOW DR. PLANT CITY, FL 33566 PLANT CITY, FL 33566

Current Mailing Address: New Mailing Address:

PO BOX 4596 PO BOX 4596

PLANT CITY, FL 335664596 PLANT CITY, FL 335644596

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

COPELAND, MARSHA
2712 SPRINGMEADOW DR.
PLANT CITY, FL 33564 US

GARDNER, LYNN
2705 SPRING MEADOW DR.
PLANT CITY, FL 33566 US

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: LYNN GARDNER 01/17/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 DOBROVIE, STEVE
 Name:
 HALLEY, JUDY

 Address:
 2804 BROOK PINE CT
 Address:
 1735 BROOKSTONE WAY

 City-St-Zip:
 PLANT CITY, FL 33566
 City-St-Zip:
 PLANT CITY, FL 33566

Title: VDT ( ) Delete Title: VDT (X) Change ( ) Addition Name: COPELAND, MARSHA Name: GUARINO, BETTE

Address: 2712 SPRING MEADOW DR. Address: 1741 BROOKSTONE WAY
City-St-Zip: PLANT CITY, FL 33566 City-St-Zip: PLANT CITY, FL 33566

Title: VD ( ) Delete Title: SD (X) Change ( ) Addition

Name:FAGNAN, JASONName:GARDNER, LYNNAddress:1714 BROOKSTONE WAYAddress:2705 SPRING MEADOW DR.City-St-Zip:PLANT CITY, FL 33566City-St-Zip:PLANT CITY, FL 33566

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: LYNN GARDNER SD 01/17/2005