

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004052

FILED  
Apr 20, 2007  
Secretary of State

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

**Current Principal Place of Business:**

1735 BROOKSTONE WAY  
PLANT CITY, FL 33566

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 4596  
PLANT CITY, FL 335644596

**New Mailing Address:**

**FEI Number:** 59-3537508

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HALLEY, JUDY  
1735 BROOKSTONE WAY  
PLANT CITY, FL 33566 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: PD ( ) Delete  
Name: HALLEY, JUDY  
Address: 1735 BROOKSTONE WAY  
City-St-Zip: PLANT CITY, FL 33566

Title: VDT ( ) Delete  
Name: GUARINO, BETTE  
Address: 1741 BROOKSTONE WAY  
City-St-Zip: PLANT CITY, FL 33566

Title: S ( ) Delete  
Name: ALTAMORE, RODNEY  
Address: 1747 BROOKSTONE WAY  
City-St-Zip: PLANT CITY, FL 33566

Title: D ( ) Delete  
Name: ALTAMORE, HOLLY  
Address: 1747 BROOKSTONE WAY  
City-St-Zip: PLANT CITY, FL 33566

Title: D ( ) Delete  
Name: DEBORAH, FLOCK  
Address: 2807 SPRING MEADOW DRIVE  
City-St-Zip: PLANT CITY, FL 33566

Title: D (X) Delete  
Name: LUCAS, CHARLES  
Address: 1730 BROOKSTONE WAY  
City-St-Zip: PLANT CITY, FL 33566

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VDT (X) Change ( ) Addition  
Name: LUTZ, LOWELL  
Address: 1729 BROOKSTONE WAY  
City-St-Zip: PLANT CITY, FL 33566

Title: S (X) Change ( ) Addition  
Name: BRAUN, GERHARD  
Address: 2804 SPRING MEADOW DRIVE  
City-St-Zip: PLANT CITY, FL 33566

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: ALLEN, ROBERT  
Address: 1758 BROOKSTONE WAY  
City-St-Zip: PLANT CITY, FL 33566

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: JUDY HALLEY

PD

04/20/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date