

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004052

FILED
Apr 15, 2012
Secretary of State

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

Current Principal Place of Business:

3035 GRIFFIN BLVD
PLANT CITY, FL 33566

New Principal Place of Business:

Current Mailing Address:

PO BOX 4596
PLANT CITY, FL 335644596

New Mailing Address:

PO BOX 4596
PLANT CITY, FL 335634596

FEI Number: 59-3537508

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALDEN LAKE COMMUNITY ASSOCIATION, INC.
3035 GRIFFIN BLVD
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: VD
Name: COPELAND, RANDOLPH H
Address: 2712 SPRING MEADOW DR.
City-St-Zip: PLANT CITY, FL 33566

Title: D
Name: LEFEVERE, CURTIS L
Address: 1704 BROOKSTONE WAY
City-St-Zip: PLANT CITY, FL 33566

Title: PD
Name: BERGER, ROY H
Address: 1703 BROOKSTONE WAY
City-St-Zip: PLANT CITY, FL 33566

Title: TD
Name: ROBERTS, JAMES R
Address: 1740 BROOKSTONE WAY
City-St-Zip: PLANT CITY, FL 33566

Title: D
Name: LORENZ, SANDRA K
Address: 1744 BROOKSTONE WAY
City-St-Zip: PLANT CITY, FL 33566

Title: SD
Name: PHILBIN, SHARON S
Address: 1724 BROOKSTONE WAY
City-St-Zip: PLANT CITY, FL 33566

I hereby 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 all other like empowered.

SIGNATURE: JAMES R ROBERTS

TD

04/15/2012

Electronic Signature of Signing Officer or Director

Date