2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005444

FILED Apr 20, 2005 Secretary of State

Entity Name: WATERFORD ESTATES OWNERS ASSOCIATION, INC.

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

797 PEARL SAND DR 390 PRISTINE WATER LANE MARY ESTHER, FL 32569 MARY ESTHER, FL 32569

Current Mailing Address: New Mailing Address:

PO BOX 385

MARY ESTHER, FL 32569

FEI Number: 59-3559702 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WALKER, CURTIS DREXLER, JOE

390 PRISTINE WATER LANE 797 PEARL SAND DRIVE MARY ESTHER, FL 32569 US MARY ESTHER, FL 32569

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: JOE DREXLER 04/20/2005

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

WALKER, CURTIS DREXLER, JOE Name: Name: 797 PEARL SAND DRIVE Address: 390 PRISTINE WATER LANE Address:

City-St-Zip: MARY ESTHER, FL 32569 City-St-Zip: MARY ESTHER, FL 32569

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

Name: WEBB, FORREST Name: MERLYN, WILLIAM Address: 762 PEARL SAND DRIVE Address: 415 PRISTINE WATER LANE City-St-Zip: MARY ESTHER, FL 32569 City-St-Zip: MARY ESTHER, FL 32569

Title: () Delete Title: (X) Change () Addition FOSTER, JAMI Name: NEGRON, JASON Name:

791 PEARL SAND DR. 375 PRISTINE WATER LANE Address: Address: City-St-Zip: MARY ESTHER, FL 32569 City-St-Zip: MARY ESTHER, FL 32569

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: JASON NEGRON ST 04/20/2005