

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002647

FILED  
Jan 16, 2007  
Secretary of State

Entity Name: WATERS MARK PLANTATION HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

100 RIALTO PLACE  
MELBOURNE, FL 32901

**New Principal Place of Business:**

1575 N TROPICAL TRAIL  
MERRITT ISLAND, FL 32953

**Current Mailing Address:**

100 RIALTO PLACE  
MELBOURNE, FL 32901

**New Mailing Address:**

1575 N TROPICAL TRAIL  
MERRITT ISLAND, FL 32953

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

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

KEVIN P. MARKEY, P.L.  
96 WILLARD ST  
STE 106  
COCOA, FL 32922 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: PSD ( ) Delete  
Name: WOODSON, BRENT  
Address: 100 RIALTO PLACE - STE 748  
City-St-Zip: MELBOURNE, FL 32901

Title: D ( ) Delete  
Name: WOODSON, JILL  
Address: 100 RIALTO PLACE - STE 748  
City-St-Zip: MELBOURNE, FL 32901

Title: D ( ) Delete  
Name: PISCATELLI, AL  
Address: 100 RIALTO PLACE - STE 748  
City-St-Zip: MELBOURNE, FL 32901

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

Title: PSD (X) Change ( ) Addition  
Name: WOODSON, BRENT  
Address: 1575 N TROPICAL TRAIL  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D (X) Change ( ) Addition  
Name: WOODSON, JILL  
Address: 1575 N TROPICAL TRAIL  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D (X) Change ( ) Addition  
Name: PISCATELLI, AL  
Address: 1575 N TROPICAL TRAIL  
City-St-Zip: MERRITT ISLAND, FL 32953

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: BRENT WOODSON

PSD

01/16/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date