

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739247

Entity Name: WATERFORD CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**

C/O FIRST SERVICE RESIDENTIAL, INC.
6300 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487

Current Mailing Address:

C/O FIRST SERVICE RESIDENTIAL, INC.
6300 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487 US

FEI Number: 59-1756738**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**

MANNING-HUDSON, LAURA M. ESQ.
1655 PALM BEACH LAKES BLVD.
SUITE C-500
WEST PALM BEACH , FL 33401 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: LAURA MANNING-HUDSON ESQ.

03/30/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name KLEIN, BRUCE
Address C/O FIRST SERVICE RESIDENTIAL,
 INC.
 6300 PARK OF COMMERCE BLVD
City-State-Zip: BOCA RATON FL 33487

Title SECRETARY
Name BERKOWITZ, LINDA
Address C/O FIRST SERVICE RESIDENTIAL,
 INC.
 6300 PARK OF COMMERCE BLVD
City-State-Zip: BOCA RATON FL 33487

Title VP
Name ROSENTHAL, SANDRA
Address C/O FIRST SERVICE RESIDENTIAL,
 INC.
 6300 PARK OF COMMERCE BLVD
City-State-Zip: BOCA RATON FL 33487

Title TREASURER
Name LANCES, STUART
Address C/O FIRST SERVICE RESIDENTIAL,
 INC.
 6300 PARK OF COMMERCE BLVD
City-State-Zip: BOCA RATON FL 33487

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: BRUCE KLEIN

PRESIDENT

03/30/2020

Electronic Signature of Signing Officer/Director Detail

Date