

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749312

Entity Name: WILDEWOOD SPRINGS II-B CONDOMINIUM ASSOCIATION, INC.**FILED**
Mar 07, 2017
Secretary of State
CC1102478671**Current Principal Place of Business:**4134 GULF OF MEXICO DR.
SUITE 203
LONGBOAT KEY, FL 34228**Current Mailing Address:**4134 GULF OF MEXICO DR.
SUITE 203
LONGBOAT KEY, FL 34228 US**FEI Number: 59-2002764****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**GARRISON, MICHAEL J.
4134 GULF OF MEXICO DR.
SUITE 203
LONGBOAT KEY, FL 34228 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: J. MICHAEL GARRISON****03/07/2017**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** SECRETARY
Name GARRISON, MICHAEL J
Address 4134 GULF OF MEXICO DR.
SUITE 203
City-State-Zip: LONGBOAT KEY FL 34228**Title** TREASURER
Name PASCARELLA, KATHY
Address 4134 GULF OF MEXICO DR.
SUITE 203
City-State-Zip: LONGBOAT KEY FL 34228**Title** DIRECTOR
Name WEICHEL, CRAIG
Address 4134 GULF OF MEXICO DR.
SUITE 203
City-State-Zip: LONGBOAT KEY FL 34228**Title** PRESIDENT
Name FOSSEN, KATHY
Address 4134 GULF OF MEXICO DR.
SUITE 203
City-State-Zip: LONGBOAT KEY FL 34228**Title** VP
Name POTTS, RICHARD
Address 4134 GULF OF MEXICO DR.
SUITE 203
City-State-Zip: LONGBOAT KEY FL 34228

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: MICHAEL J. GARRISON**SECRETARY****03/07/2017**

Electronic Signature of Signing Officer/Director Detail

Date