

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 755930

**Entity Name:** WEXFORD WEST HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

981 KENT LANE  
PALM HARBOR, FL 34683

**Current Mailing Address:**

PO BOX 473  
PALM HARBOR, FL 34682

**FEI Number:** 59-2060768

**Certificate of Status Desired:** No

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

FERRARI, PATRICIA L ESQUIRE  
19439 SHUMARD OAK DRIVE  
SUITE 102  
LAND O LAKES, FL 34638 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MCGERALD, DAVID  
Address        981 KENT LANE  
City-State-Zip: PALM HARBOR FL 34683

Title            VP  
Name            HILL, DAN  
Address        1001 KENT LANE  
City-State-Zip: PALM HARBOR FL 34683

Title            CORRESPONDING SECRETARY  
Name            LAWRENCE, GAYLE  
Address        488 DAVENTRY SQUARE  
City-State-Zip: PALM HARBOR FL 34683

Title            OTHER  
Name            CIESKIEWICZ, PAT  
Address        434 THANINGTON CL  
City-State-Zip: PALM HARBOR FL 34683

Title            TREASURER  
Name            DUGA, PETER  
Address        990 KENT LANE  
City-State-Zip: PALM HARBOR FL 34683

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:** DAVID MCGERALD

**PRESIDENT**

**03/13/2014**

Electronic Signature of Signing Officer/Director Detail

Date