SIGNATURE:	MAUREEN C REARDON			03/28/2023 Date
	Electronic Signature of Registered Agent			
Officer/Direc	ctor Detail :			
Title	PD	Title	VP	
Name	DANIEL, JOE	Name	WRIGHT, PAT	
Address	4151 WOODLANDS PARKWAY	Address	4151 WOODLANDS PARKWAY	
City-State-Zip:	PALM HARBOR FL 34685	City-State-Zip:	PALM HARBOR FL 34685	
Title	TREASURER	Title	SECRETARY	
Name	BARNEY, GAIL	Name	CAPABIANCO, KATHY	
Address	4151 WOODLANDS PARKWAY	Address	4151 WOODLANDS PARKWAY	
City-State-Zip:	PALM HARBOR FL 34685	City-State-Zip:	PALM HARBOR FL 34685	
Title	DIR			
Name	STULAK, BRIAN			
Address	4151 WOODLANDS PARKWAY			
City-State-Zip:	PALM HARBOR FL 34685			

### 4151 WOODLANDS PARKWAY PALM HARBOR, FL 34685 US

**Current Principal Place of Business:** 

DOCUMENT# 758807

4151 WOODLANDS PARKWAY PALM HARBOR, FL 34685

**Current Mailing Address:** 

# FEI Number: 59-2101720

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

REARDON, MAUREEN C 4151 WOODLANDS PARKWAY PALM HARBOR, FL 34685 US

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: WESTLAKE VILLAS CONDOMINIUM ASSOCIATION, INC.

Electronic Signature of Signing Officer/Director Detail

above, or on an attachment with all other like empowered.

SIGNATURE: JOE DANIEL

PRESIDENT

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

## FILED Mar 28, 2023 Secretary of State 2002535677CC

Certificate of Status Desired: No

03/28/2023

Date