# Entity Name: THE WATERWAYS COMMUNITY ASSOCIATION, INC.

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# Current Principal Place of Business:

11784 WEST SAMPLE ROAD SUITE 103 CORAL SPRINGS, FL 33065

**DOCUMENT# 770585** 

### **Current Mailing Address:**

11784 WEST SAMPLE ROAD SUITE 103 CORAL SPRINGS, FL 33065 US

## FEI Number: 59-2446177

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

UNITED COMMUNITY MANAGEMENT CORP. 11784 WEST SAMPLE ROAD SUITE 103 CORAL SPRINGS, FL 33065 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	RENEE CAMPBELL			04/27/2022
	Electronic Signature of Registered Agent			Date
Officer/Dired	ctor Detail :			
Title	D	Title	PRESIDENT	
Name	DISH, AVI	Name	KNOLLMAIER, PAUL	
Address	11784 WEST SAMPLE ROAD SUITE 103	Address	11784 WEST SAMPLE ROAD SUITE 103	
City-State-Zip:	CORAL SPRINGS FL 33065	City-State-Zip:	CORAL SPRINGS FL 33065	
Title	DIRECTOR	Title	TREASURER	
Name	ROCKWERK, SANDY	Name	HENIGMAN, JAMES	
Address	11784 WEST SAMPLE ROAD SUITE 103	Address	11784 WEST SAMPLE ROAD SUITE 103	
City-State-Zip:	CORAL SPRINGS FL 33065	City-State-Zip:	CORAL SPRINGS FL 33065	
Title	DIRECTOR	Title	DIRECTOR	
Name	MONTIEL, CARLOS	Name	HOFFMAN, MARSHA	
Address	11784 WEST SAMPLE ROAD SUITE 103	Address	11784 WEST SAMPLE ROAD SUITE 103	
City-State-Zip:	CORAL SPRINGS FL 33065	City-State-Zip:	CORAL SPRINGS FL 33065	
Title	DIRECTOR	Title	DIRECTOR	
Name	SMITH, STEVEN	Name	BAUMAN, SANDRA	
Address	11784 WEST SAMPLE ROAD SUITE 103	Address	11784 WEST SAMPLE ROAD SUITE 103	
City-State-Zip:	CORAL SPRINGS FL 33065	City-State-Zip:	CORAL SPRINGS FL 33065	

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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: PAUL KNOLLMAIER

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

04/27/2022

Date

# **Officer/Director Detail Continued :**

Title	DIRECTOR
Name	TORJMAN, MAURICE
Address	11784 WEST SAMPLE ROAD SUITE 103
City-State-Zip:	CORAL SPRINGS FL 33065
Title	DIRECTOR
Name	PALDINO, DIANE
Address	11784 WEST SAMPLE ROAD SUITE 103
City-State-Zip:	CORAL SPRINGS FL 33065
Title	DIRECTOR
Name	SURKIN, EDDIE
Address	11784 W SAMPLE RD SUITE 103
City-State-Zip:	CORAL SPRINGS FL 33065

Title	DIRECTOR
Name	HARROLD, JAY
Address	11784 WEST SAMPLE ROAD SUITE 103
City-State-Zip:	CORAL SPRINGS FL 33065
Title	DIRECTOR
Title Name	DIRECTOR WEISZ, MARTINE
Name	WEISZ, MARTINE 11784 W SAMPLE RD