

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006325

Entity Name: WEKIVA VILLAGE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

640 E. STATE ROAD 434 SUITE 3000
LONGWOOD, FL 32750

Current Mailing Address:

640 E. STATE ROAD 434 SUITE 3000
LONGWOOD, FL 32750 US

FEI Number: 59-3707561

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BONO AND ASSOCIATES
640 E. STATE ROAD 434 SUITE 3000
LONGWOOD, FL 32750 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: MICHAEL L BONO

04/25/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name ABRAHAMS, WILLIAM
Address 640 E. STATE ROAD 434 SUITE 3000
City-State-Zip: LONGWOOD FL 32750

Title SECRETARY
Name HARRIS, LAUREN
Address 640 E. STATE ROAD 434 SUITE 3000
City-State-Zip: LONGWOOD FL 32750

Title PRESIDENT
Name GAMBLE, JAMES
Address 640 E. STATE ROAD 434 SUITE 3000
City-State-Zip: LONGWOOD FL 32750

Title TREASURER
Name GRAFALS, ELIZABETH
Address 640 E. STATE ROAD 434 SUITE 3000
City-State-Zip: LONGWOOD FL 32750

Title VP
Name SALVINO, ROBERT
Address 640 E. STATE ROAD 434 SUITE 3000
City-State-Zip: LONGWOOD FL 32750

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: JAMES GAMBLE

PRESIDENT

04/25/2019

Electronic Signature of Signing Officer/Director Detail

Date