

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006325

FILED
Mar 25, 2013
Secretary of State
CC7613696105

Entity Name: WEKIVA VILLAGE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O PREMIER COMMUNITY MANAGERS, INC.
1250 BELLE AVE., SUITE 101
WINTER SPRINGS, FL 32708

Current Mailing Address:

C/O PREMIER COMMUNITY MANAGERS, INC.
1250 BELLE AVE., SUITE 101
WINTER SPRINGS, FL 32708 US

FEI Number: 59-3707561

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PREMIER COMMUNITY MANAGERS, INC.
1250 BELLE AVE.
SUITE 101
WINTER SPRINGS, FL 32708 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 VP/T
Name CRAWFORD, JO ANNE
Address 1250 BELLE AVE., SUITE 101
City-State-Zip: WINTER SPRINGS FL 32708

Title P
Name MCNAULL, MICHAEL E
Address 1250 BELLE AVE., SUITE 101
City-State-Zip: WINTER SPRINGS FL 32708

Title D
Name ABRAHAMS, WILLIAM
Address 1250 BELLE AVE., SUITE 101
City-State-Zip: WINTER SPRINGS FL 32708

Title S
Name MENKE, MICHELLE
Address 1250 BELLE AVE., SUITE 101
City-State-Zip: WINTER SPRINGS FL 32708

Title D
Name MARCY, SHARON R
Address 1250 BELLE AVE., SUITE 101
City-State-Zip: WINTER SPRINGS FL 32708

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 E MCNAULL

PRESIDENT

03/25/2013

Electronic Signature of Signing Officer/Director Detail

Date