Current Mai	ling Address:						
1801 COOK ORLANDO,	AVE. FL 32806 US						
FEI Number: 59-3711977			Certificate of Status Desired: No				
Name and A	ddress of Current Registered Agent:						
DON ASHER & 1801 COOK AV ORLANDO, FL							
,			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.				
	l entity submits this statement for the purpose of changing its regis	stered office or regis	tered agent, or both, in the State of	Florida.			
The above named	l entity submits this statement for the purpose of changing its regis	stered office or regis	tered agent, or both, in the State of	Florida. 01/17/2023			
The above named		stered office or regis	tered agent, or both, in the State of				
The above named	Electronic Signature of Registered Agent	stered office or regis	tered agent, or both, in the State of	01/17/2023			
The above named SIGNATURE	Electronic Signature of Registered Agent	stered office or regis	tered agent, or both, in the State of	01/17/2023			
The above named SIGNATURE Officer/Dired	E: ASHER, DEAN Electronic Signature of Registered Agent			01/17/2023			
The above named SIGNATURE Officer/Direc Title	Electronic Signature of Registered Agent Ctor Detail : PRESIDENT	Title	VP, TREASURER	01/17/2023			
The above named SIGNATURE Officer/Dired Title Name	Electronic Signature of Registered Agent Ctor Detail : PRESIDENT NOURAFCHAN , MARC	Title Name	VP, TREASURER WILLIAMS, NICOLE 1801 COOK AVE	01/17/2023			

Name

Address

City-State-Zip:

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000007951

Entity Name: WATERFORD LAKES COMMERCIAL FACILITIES OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

WATERFORD LAKES CFO WATERFORD LAKES BLVD ORLANDO, FL 32809

Current Mailing Address:

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: NOURAFCHAN, MARC

HERBON, JIM

1801 COOK AVE.

ORLANDO FL 32806

Name

Address

City-State-Zip:

PRESIDENT

01/17/2023

Electronic Signature of Signing Officer/Director Detail

FILED Jan 17, 2023 Secretary of State 6108222060CC

GLINSKI, LYNDA

1801 COOK AVE.

ORLANDO FL 32806