## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007290

Entity Name: WATERFORD OAKS HOMEOWNERS ASSOCIATION, INC.

FILED
Apr 17, 2018
Secretary of State
CC3933594928

# **Current Principal Place of Business:**

9513 WATERFORD OAKS BLVD WINTER HAVEN. FL 33884

## **Current Mailing Address:**

6039 CYPRESS GARDENS BLVD PMB 524 WINTER HAVEN, FL 33884

FEI Number: 59-3754999 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

DELEO, LOUIS 9513 WATERFORD OAKS BLVD WINTER HAVEN, FL 33884 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	PRESIDENT	Title	SECRETARY
Name	DELEO, LOUIS	Name	DONLEY, LAURA

Address 9513 WATERFORD OAKS BLVD Address 9509 WATERFORD OAKS BLVD
City-State-Zip: WINTER HAVEN FL 33884 City-State-Zip: WINTER HAVEN FL 33884

TitleTREASURERTitleDIRECTORNameCLOSS, STEVENameBARSOTTI, JOEAddress9516 WATERFORD OAKS DRIVEAddressPO BOX 1229

City-State-Zip: WINTER HAVEN FL 33884 City-State-Zip: WINTER HAVEN FL 33882

TitleDIRECTORTitleDIRECTORNameMARTIN, JUDDNameTINUS, STEVE

Address 9507 WATERFORD OAKS BLVD Address 9467 WATERFORD OAKS DRIVE City-State-Zip: WINTER HAVEN FL 33884 City-State-Zip: WINTER HAVEN FL 33884

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: STEVE CLOSS TREASI

Electronic Signature of Signing Officer/Director Detail

TREASURER 04/17/2018