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: KATHY CLARK

PRESIDENT

# Entity Name: WATER-OAKS REGATTA HOMEOWNERS ASSOCIATION, INC.

## **Current Principal Place of Business:**

**1049 JOHN SIMS PARKWAY** SUITE 1 NICEVILLE, FL 32578

#### **Current Mailing Address:**

PO BOX 73 NICEVILLE, FL 32588 US

### FEI Number: 59-2390022

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

PANHANDLE MANAGEMENT, LLC 1049 JOHN SIMS PARKWAY SUITE 1 NICEVILLE, FL 32578 US

Certificate of Status Desired: No

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	CARMEN SOUDERS			04/26/2019
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	VP	Title	PRESIDENT	
Name	ROWLAND, ROSIE	Name	CLARK, KATHY	
Address	PO BOX 73	Address	PO BOX 73	
City-State-Zip:	NICEVILLE FL 32588	City-State-Zip:	NICEVILLE FL 32588	
Title	SECRETARY	Title	TREASURER	
Name	EXTERKAMP, JAN	Name	DUTTON, RODNEY	
Address	PO BOX 73	Address	PO BOX 73	
City-State-Zip:	NICEVILLE FL 32588	City-State-Zip:	NICEVILLE FL 32588	
Title	DIRECTOR			
Name	COTY, DONNA REV			
Address	PO BOX 73			
City-State-Zip:	NICEVILLE FL 32588			

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01298

04/26/2019

Date

FILED Apr 26, 2019 Secretary of State 8200174272CC

Electronic Signature of Signing Officer/Director Detail