DOCUMENT# N0200000608 Entity Name: WATERFORD VILLAS HOMEOWNERS ASSOCIATION, INC. Current Principal Place of Business:			NC.	Mar 15, 2023 Secretary of State 3244879272CC
1000 PINE HOL	•			
Current Mai	ing Address:			
1000 PINE H ALTAMONT	IOLLOW PT E SPRINGS, FL 32714 US			
FEI Number: 41-2068740 Ce		Certificate of	Status Desired: No	
Name and A	ddress of Current Registered Agent:			
1000 PINE HOL	NAGEMENT CO LOW PT PRINGS, FL 32714 US			
The above named	entity submits this statement for the purpose of changing its reg	istered office or regis	tered agent, or both,	in the State of Florida.
	entity submits this statement for the purpose of changing its reg	istered office or regis	tered agent, or both,	in the State of Florida. 03/15/2023
		istered office or regis	tered agent, or both,	
	BRETT M JORDAN Electronic Signature of Registered Agent	istered office or regis	tered agent, or both,	03/15/2023
SIGNATURE	BRETT M JORDAN Electronic Signature of Registered Agent	istered office or regis	tered agent, or both,	03/15/2023
SIGNATURE	BRETT M JORDAN Electronic Signature of Registered Agent Ctor Detail :			03/15/2023 Date
SIGNATURE Officer/Direc Title	BRETT M JORDAN Electronic Signature of Registered Agent Ctor Detail : PRESIDENT, DIRECTOR	Title	VP, DIRECTOR	03/15/2023 Date
SIGNATURE Officer/Direc Title Name Address	BRETT M JORDAN     Electronic Signature of Registered Agent     Ctor Detail :     PRESIDENT, DIRECTOR     MACKO, MELISSA	Title Name	VP, DIRECTOR LAMBERT, LISA 1000 PINE HOLI	03/15/2023 Date
SIGNATURE Officer/Direc Title Name Address	Electronic Signature of Registered Agent Electronic Signature of Registered Agent Ctor Detail : PRESIDENT, DIRECTOR MACKO, MELISSA 1000 PINE HOLLOW PT	Title Name Address	VP, DIRECTOR LAMBERT, LISA 1000 PINE HOLI	03/15/2023 Date
SIGNATURE Officer/Direc Title Name Address City-State-Zip:	Electronic Signature of Registered Agent Electronic Signature of Registered Agent Ctor Detail : PRESIDENT, DIRECTOR MACKO, MELISSA 1000 PINE HOLLOW PT ALTAMONTE SPRINGS FL 32714	Title Name Address City-State-Zip:	VP, DIRECTOR LAMBERT, LISA 1000 PINE HOLI ALTAMONTE SF	03/15/2023 Date LOW PT PRINGS FL 32714
SIGNATURE Officer/Direc Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent Electronic Signature of Registered Agent Ctor Detail : PRESIDENT, DIRECTOR MACKO, MELISSA 1000 PINE HOLLOW PT ALTAMONTE SPRINGS FL 32714 SECRETARY, DIRECTOR	Title Name Address City-State-Zip: Title	VP, DIRECTOR LAMBERT, LISA 1000 PINE HOLI ALTAMONTE SF DIRECTOR	03/15/2023 Date LOW PT PRINGS FL 32714 CENZO
SIGNATURE Officer/Direc Title Name Address City-State-Zip: Title Name	Electronic Signature of Registered Agent Electronic Signature of Registered Agent Ctor Detail : PRESIDENT, DIRECTOR MACKO, MELISSA 1000 PINE HOLLOW PT ALTAMONTE SPRINGS FL 32714 SECRETARY, DIRECTOR TOENJES, ROSIE 1000 PINE HOLLOW PT	Title Name Address City-State-Zip: Title Name	VP, DIRECTOR LAMBERT, LISA 1000 PINE HOLI ALTAMONTE SF DIRECTOR RAGOSTA , VIN 1000 PINE HOLI	03/15/2023 Date LOW PT PRINGS FL 32714 CENZO
SIGNATURE Officer/Direc Title Name Address City-State-Zip: Title Name Address	Electronic Signature of Registered Agent Electronic Signature of Registered Agent Ctor Detail : PRESIDENT, DIRECTOR MACKO, MELISSA 1000 PINE HOLLOW PT ALTAMONTE SPRINGS FL 32714 SECRETARY, DIRECTOR TOENJES, ROSIE 1000 PINE HOLLOW PT	Title Name Address City-State-Zip: Title Name Address	VP, DIRECTOR LAMBERT, LISA 1000 PINE HOLI ALTAMONTE SF DIRECTOR RAGOSTA , VIN 1000 PINE HOLI	03/15/2023 Date LOW PT PRINGS FL 32714 CENZO LOW PT

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: MELISSA MACKO

1000 PINE HOLLOW PT City-State-Zip: ALTAMONTE SPRINGS FL 32714

Address

PRESIDENT

03/15/2023

Electronic Signature of Signing Officer/Director Detail

Date