DOCUMENT# N0200000608		

Entity Name: WATERFORD VILLAS HOMEOWNERS ASSOCIATION, INC.

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## Current Principal Place of Business:

2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 32779

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

2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 32779 US

#### FEI Number: 41-2068740

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

SENTRY MANAGEMENT INC 2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 32779 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:	BRADLEY POMP			04/06/2016
	Electronic Signature of Registered Agent			Date
Officer/Direc	tor Detail :			
Title	PRESIDENT, DIRECTOR	Title	VP, DIRECTOR	
Name	CHAPMAN, LINDA	Name	RAGOSTA, VINCENZO	
Address	2180 WEST SR 434 STE 5000	Address	2180 WEST SR 434 STE 5000	
City-State-Zip:	LONGWOOD FL 32779	City-State-Zip:	LONGWOOD FL 32779	
Title	SECRETARY, DIRECTOR	Title	TREASURER, DIRECTOR	
Name	PARKER, GEORGE	Name	LAMBERT, LISA	
Address	2180 WEST SR 434 STE 5000	Address	2180 WEST SR 434 STE 5000	
City-State-Zip:	LONGWOOD FL 32779	City-State-Zip:	LONGWOOD FL 32779	
Title	DIRECTOR			
Name	HALL, GAVIN			
Address	2180 WEST SR 434 STE 5000			
City-State-Zip:	LONGWOOD FL 32779			

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: LINDA CHAPMAN

PRESIDENT

04/06/2016

Electronic Signature of Signing Officer/Director Detail

# FILED Apr 06, 2016 Secretary of State CC7715084847

Certificate of Status Desired: No

Date