

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000001631

**FILED**  
**May 18, 2020**  
**Secretary of State**  
**6413672040CC**

**Entity Name:** THE ESTATES AT WEKIVA PARK HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

6972 LAKE GLORIA BLVD  
ORLANDO, FL 32809-3200

**Current Mailing Address:**

6972 LAKE GLORIA BLVD  
ORLANDO, FL 32809-3200 US

**FEI Number: 01-0641162**

**Certificate of Status Desired: No**

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

LELAND MANAGEMENT  
6972 LAKE GLORIA BLVD  
ORLANDO, FL 32809-3200 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  
Name           SIMS, TRACY  
Address        6972 LAKE GLORIA BLVD  
City-State-Zip: ORLANDO FL 32809

Title           S/T  
Name           KWIATKOWSKI, HARRY JR.  
Address        6972 LAKE GLORIA BLVD  
City-State-Zip: ORLANDO FL 32809

Title           VP  
Name           BURROWS, DENNIS P.  
Address        6972 LAKE GLORIA BLVD  
City-State-Zip: ORLANDO FL 32809

Title           DIRECTOR  
Name           GONZALEZ, WANDA  
Address        6972 LAKE GLORIA BLVD  
City-State-Zip: ORLANDO FL 32809-3200

Title           DIRECTOR  
Name           KISS, KRISTEN  
Address        6972 LAKE GLORIA BLVD  
City-State-Zip: ORLANDO FL 32809-3200

*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: TRACY SIMS**

**PRESIDENT**

**05/18/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date