## 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005805

Entity Name: REFLECTIONS WEST HOMEOWNERS ASSOCIATION, INC.

FILED
Jan 28, 2013
Secretary of State
CC1128178754

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

8390 CHAMPIONSGATE BLVD. SUITE 304

CHAMPIONSGATE, FL 33896

## **Current Mailing Address:**

8390 CHAMPIONSGATE BLVD.

SUITE 304

CHAMPIONSGATE, FL 33896 US

FEI Number: 56-2297232 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

AEGIS COMMUNITY MANAGEMENT SOLUTIONS, INC. 8390 CHAMPIONSGATE BLVD.

SUITE 304

CHAMPIONSGATE, FL 33896 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 PRES Title VP

Name WHITT, JERROLD R Name HALL, RON

Address 8390 CHAMPIONSGATE BLVD., SUITE Address 8390 CHAMPIONSGATE BLVD., SUITE

City-State-Zip: CHAMPIONSGATE FL 33896 City-State-Zip: CHAMPIONSGATE FL 33896

Title SECRETARY/ TREASURER Title DIR

Name PHILLIPS, KATERINA Name MILLSAPS, MICKEY

Address 8390 CHAMPIONSGATE BLVD., SUITE Address 8390 CHAMPIONSGATE BLVD., SUITE

City-State-Zip: CHAMPIONSGATE FL 33896 City-State-Zip: CHAMPIONSGATE FL 33896

Title D

Name DOUD, PATRICIA

Address 8390 CHAMPIONS GATE BLVD. #304

City-State-Zip: CHAMPIONS GATE FL 33896

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: JERROLD WHITT PRESIDENT

01/28/2013