

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000008486

**FILED**  
**Apr 24, 2019**  
**Secretary of State**  
**4154109927CC**

**Entity Name:** THOMPSON CENTER WATERS PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

5455 W. WATERS AVENUE  
SUITE 211  
TAMPA, FL 33634

**Current Mailing Address:**

5455 W. WATERS AVENUE  
SUITE 211  
TAMPA, FL 33634

**FEI Number: 20-1590908**

**Certificate of Status Desired: No**

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

TOMAS, KATHY STD  
5455 W. WATERS AVENUE, SUITE211  
TAMPA, FL 33634 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: KATHY TOMAS**

**04/24/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name WALLERT, BENJAMIN  
Address 5455 W. WATERS AVENUE, SUITE 211  
City-State-Zip: TAMPA FL 33634

Title VPD  
Name CIVITANOVA, THOMAS  
Address 5455 W. WATERS AVENUE  
SUITE 211  
City-State-Zip: TAMPA FL 33634

Title STD  
Name TOMAS, KATHY STD  
Address 5455 W. WATERS AVENUE, SUITE 211  
City-State-Zip: TAMPA FL 33634

*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 TOMAS**

**SECRETARY/TREASURER 04/24/2019**

Electronic Signature of Signing Officer/Director Detail

Date