

2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N05000009354

Entity Name: WOLF CREEK CONDOMINIUM ASSOCIATION, INC.

FILED
Nov 02, 2021
Secretary of State
6534080481CC

Current Principal Place of Business:

13364 BEACH BLVD.
ASSOCIATION MANAGER'S OFFICE
JACKSONVILLE, FL 32224

Current Mailing Address:

13364 BEACH BLVD.
ASSOCIATION MANAGER'S OFFICE
JACKSONVILLE, FL 32224 US

FEI Number: 59-3817461

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WASSERSTEIN, P.A.
301 YAMATO ROAD
SUITE 2199
BOCA RATON, FL 33431 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 LEGANT, WILLIAM
Address 13364 BEACH BLVD. MANAGER'S OFFICE
City-State-Zip: JACKSONVILLE FL 32224

Title VP
Name MCGUIGAN, KATHERINE
Address 13364 BEACH BLVD. ASSOCIATION MANAGER'S OFFICE
City-State-Zip: JACKSONVILLE FL 32224

Title TREASURER
Name KURASEK, DEBORAH
Address 13364 BEACH BLVD. ASSOCIATION MANAGER'S OFFICE
City-State-Zip: JACKSONVILLE FL 32224

Title SECRETARY
Name CHANDARIA, NITIN
Address 13364 BEACH BLVD. ASSOCIATION MANAGER'S OFFICE
City-State-Zip: JACKSONVILLE FL 32224

Title DIRECTOR
Name PINGEL, KAREN
Address 13364 BEACH BLVD. ASSOCIATION MANAGER'S OFFICE
City-State-Zip: JACKSONVILLE FL 32224

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: WILLIAM LEGANT

PRESIDENT

11/02/2021

Electronic Signature of Signing Officer/Director Detail

Date