

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000009881

**Entity Name:** WATERSOUND WEST BEACH COMMUNITY ASSOCIATION, INC.

**FILED**  
**Apr 27, 2017**  
**Secretary of State**  
**CC1676237549**

**Current Principal Place of Business:**

133 SOUTH WATERSOUND PARKWAY  
WATERSOUND, FL 32413

**Current Mailing Address:**

215 GRAND BLVD.  
SUITE 200  
MIRAMAR BEACH, FL 32550 US

**FEI Number:** 20-3541929

**Certificate of Status Desired:** No

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

DUNLAP & SHIPMAN, PA  
2063 COUNTY HWY 395  
SANTA ROSA BEACH, FL 32459 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:** DAVID MILAM

04/27/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D-P  
Name WHALEY, ALEX  
Address PO BOX 768  
C/O WHALEY CONSTRUCTION CO  
INC  
City-State-Zip: TROY AL 36081

Title DIRECTOR  
Name WARD, CHARLES  
Address 50 FARNHAM PI  
City-State-Zip: METAIRIE LA 70005

Title DIRECTOR  
Name GRUETER, JOHN  
Address 133 SOUTH WATERSOUND PARKWAY  
City-State-Zip: WATERSOUND FL 32413

Title D-VP  
Name BOGENREIF, MICHAEL  
Address 6 HARVEST MOON LANE  
City-State-Zip: SANTA ROSA BEACH FL 32459  
Title TREASURER, SECRETARY  
Name FISCHER, RICHARD  
Address 8 BLUE MOON COURT  
City-State-Zip: SANTA ROSA BEACH FL 32459

*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:** ALEX WHALEY

**PRESIDENT**

04/27/2017

Electronic Signature of Signing Officer/Director Detail

Date