FEI Number: 20-4767229	Certificate of Status Desired: No
Name and Address of Current Registered Agent:	
ARIAS BOSINGER 140 N. WESTMONTE DRIVE SUITE 203 ALTAMONTE SPRINGS, FL 32714 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: ADAM W. CARLS	04/08/20
Electronic Signature of Registered Agent	Date
Officer/Director Detail :	

Officer/Director Detail :			
Title	PRESIDENT, DIRECTOR	Title	VP
Name	MASI, PHIL	Name	YOSEFI, GIL
Address	4700 WALDEN CIRCLE	Address	4700 WALDEN CIRCLE
City-State-Zip:	ORLANDO FL 32811	City-State-Zip:	ORLANDO FL 32811
Title	SECRETARY/TREASURER	Title	DIRECTOR
Name	ORTIZ, JUDITH	Name	COLLINS, VERONICA
Address	4700 WALDEN CIRCLE	Address	4700 WALDEN CIRCLE
City-State-Zip:	ORLANDO FL 32811	City-State-Zip:	ORLANDO FL 32811

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: PHIL MASI

PRESIDENT

04/08/2019

Electronic Signature of Signing Officer/Director Detail

# 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# DOCUMENT# N0600000460

# Entity Name: WALDEN PALMS CONDOMINIUM ASSOCIATION, INC.

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

4700 WALDEN CIRCLE ORLANDO, FL 32811

### **Current Mailing Address:**

C/O KWPMC, 8200 NE 33RD STREET, SUITE 300 MIAMI, FL 33122 US

### FEI Number: 20-4767229

### FILED Apr 08, 2019 **Secretary of State** 4750557787CC

04/08/2019 Date

Date