

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010213

Entity Name: WATERFORD SOUND OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**1870 COAST CT
GULF BREEZE
GULF BREEZE, FL 32563**Current Mailing Address:**PO BOX 6389
NAVARRE, FL 32566 US**FEI Number:** 20-8568650**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CRABB, ROBERT
1870 COAST CT
GULF BREEZE
GULF BREEZE, FL 32563 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:** ROBERT CRABB

04/23/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	SECRETARY
Name	JOHNSON, WENDY
Address	1699 BRANTLEY DR.
City-State-Zip:	GULF BREEZE FL 32563

Title	TREASURER
Name	MURPHY, GERALD
Address	1810 COAST COURT
City-State-Zip:	GULF BREEZE FL 32563

Title	PRESIDENT
Name	GREENE, JANE
Address	1910 TRITON DR
City-State-Zip:	GULF BREEZE FL 32563

Title	DIRECTOR, ARCHITECTURAL REVIEW BOARD (ARB)
Name	REGALA, JARED
Address	1725 WATERFORD SOUND BLVD
City-State-Zip:	GULF BREEZE FL 32563

Title	DIRECTOR, TECHNICAL SUPPORT
Name	CRABB, ROBERT
Address	1696 BRANTLEY DR.
City-State-Zip:	GULF BREEZE FL 32563

Title	OTHER
Name	WILLINGHAM, WILLIAM
Address	1894 TRITON DR
City-State-Zip:	GULF BREEZE FL 32563

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: ROBERT CRABB JR

TECH DIRECTOR

04/23/2021

Electronic Signature of Signing Officer/Director Detail

Date