

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000010213

**Entity Name:** WATERFORD SOUND OWNERS ASSOCIATION, INC.

**FILED**  
**Apr 16, 2023**  
**Secretary of State**  
**7029306119CC**

**Current Principal Place of Business:**

1810 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: No**

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

MURPHY, GERALD  
1810 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: GERALD MURPHY**

**04/16/2023**

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 PISCHETOLA, TONY  
Address 1700 WATERFORD SOUND BLVD  
City-State-Zip: GULF BREEZE FL 32563

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

Title VP  
Name JEFFREY, LAURIE  
Address 1828 BRANTLEY DRIVE  
City-State-Zip: GILF 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: GERALD MURPHY**

**TREASURER**

**04/16/2023**

Electronic Signature of Signing Officer/Director Detail

Date