## 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06949

Entity Name: WINGED FOOT COTTAGE OWNERS ASSOCIATION, INC.

FILED
Apr 02, 2021
Secretary of State
6795818785CC

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

1111 SE FEDERAL HWY SUITE 100 STUART, FL 34994

## **Current Mailing Address:**

1111 SE FEDERAL HWY SUITE 100 STUART, FL 34994

FEI Number: 59-2481859 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ADVANTAGE PROPERTY MANAGEMENT 1111 SE FEDERAL HWY SUITE 100 STUART, FL 34994 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:

City-State-Zip:

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title SD Title PD

Name MCTAMMANY, JOYCE Name DUANE, LAWRENCE

Address 1111 SE FEDERAL HWY Address 1111 SE FEDERAL HWY

SUITE 100 SUITE 100

City-State-Zip: STUART FL 34994 City-State-Zip: STUART FL 34994

Title TD Title VPD

Name RACEVICIUS, MARIE Name CORONITI, RICARDO

Address 1111 SE FEDERAL HWY Address 1111 SE FEDERAL HWY

1111 SE FEDERAL HWY Address 1111 SE FEDERAL H SUITE 100 SUITE 100

STUART FL 34994 City-State-Zip: STUART FL 34994

Title D Title D

Name FLANAGAN, JACK Name CONNOLLY, LORRAINE

Address 1111 SE FEDERAL HWY Address 1111 SE FEDERAL HWY

SUITE 100 SUITE 100

City-State-Zip: STUART FL 34994 City-State-Zip: STUART FL 34994

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.