

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

DOCUMENT# N07000002871

**Entity Name:** WEDGEWOOD TOWNHOMES COMMUNITY ASSOCIATION, INC.

**FILED**  
**Dec 07, 2017**  
**Secretary of State**  
**CC8291532304**

**Current Principal Place of Business:**

6554 KRYCUL AVENUE  
RIVERVIEW, FL 33578-4330

**Current Mailing Address:**

C/O EXCELSIOR COMMUNITY MANAGEMENT LLC  
6554 KRYCUL AVENUE  
RIVERVIEW, FL 33578-4330 US

**FEI Number:** 20-8848339

**Certificate of Status Desired:** No

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

GREER, GISEL  
C/O EXCELSIOR COMMUNITY MANAGEMENT LLC  
6554 KRYCUL AVENUE  
RIVERVIEW, FL 33578-4330 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:** GISEL GREER

12/07/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, PRESIDENT  
Name BEEDON, JOHN  
Address 6554 KRYCUL AVENUE  
City-State-Zip: RIVERVIEW FL 33578-4330

Title DIRECTOR, VICE-PRESIDENT,  
TREASURER  
Name HOUSE, MICHAEL L  
Address 6554 KRYCUL AVENUE  
City-State-Zip: RIVERVIEW FL 33578-4330

Title DIRECTOR, SECRETARY  
Name MCCULLERS, TAMMY  
Address 6554 KRYCUL AVENUE  
City-State-Zip: RIVERVIEW FL 33578-4330

Title NON-MEMBER LICENSED  
COMMUNITY ASSOCIATION  
MANAGER  
Name GREER, GISEL  
Address 6554 KRYCUL AVENUE  
City-State-Zip: RIVERVIEW FL 33578-4330

*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:** GISEL GREER

LCAM

12/07/2017

Electronic Signature of Signing Officer/Director Detail

Date