2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT\# N12722

Entity Name: WATERVIEW HOMEOWNERS ASSOCIATION, INC.

## Current Principal Place of Business:

28609 HWY 27 N
DUNDEE, FL 33838

## Current Mailing Address:

P.O. BOX510

DUNDEE, FL 33838 US
FEI Number: 59-2636601
Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

GARRISON PROPERTY SERVICES, LLC
28609 HWY 27 N
DUNDEE, FL 33838 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:

| JOE GARRISON | $02 / 21 / 2020$ |
| :--- | :---: |
| Electronic Signature of Registered Agent | Date |

Officer/Director Detail :

| Title | DIRECTOR | Title | SECRETARY |
| :--- | :--- | :--- | :--- |
| Name | SCHWARTZ, PAUL | Name | PITTMAN, TAMMY |
| Address | 4123 MOONRAKER | Address | 4137 MOONRAKER |
| City-State-Zip: | LAKELAND FL 33813 | City-State-Zip: | LAKELAND FL 33813 |
| Title | VP | Title | TREASURER |
| Name | PIERCE, CHERYL | Name | MCGARVEY, CHRISTOPHER |
| Address | 2124 HATTERAS POINT | Address | 2022 HATTERAS POINT |
| City-State-Zip: | LAKELAND FL 33813 | City-State-Zip: | LAKELAND FL 33813 |
| Title | DIRECTOR | Name | PRESIDENT |
| Name | PRICE, JAMES | Address | City-State-Zip: |

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[^0]:    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

