

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000007385

Entity Name: WALDEN COVE COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

2600 LAKE LUCIEN DRIVE
SUITE 350
MAITLAND, FL 32779

Current Mailing Address:

2600 LAKE LUCIEN DRIVE
SUITE 350
MAITLAND, FL 32779 US

FEI Number: 47-1782754

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name KAERCHER, SHELLEY S.
Address 2600 LAKE LUCIEN DRIVE, SUITE 350
City-State-Zip: MAITLAND FL 32779

Title VP, DIRECTOR
Name LUMM, DAVID
Address 2600 LAKE LUCIEN DRIVE, SUITE 350
City-State-Zip: MAITLAND FL 32779

Title TREASURER, SECRETARY,
 DIRECTOR
Name MAXON, ESPERANZA
Address 2600 LAKE LUCIEN DRIVE, SUITE 350
City-State-Zip: MAITLAND FL 32779

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: SHELLEY S. KAERCHER

PRESIDENT

03/05/2017

Electronic Signature of Signing Officer/Director Detail

Date