#### 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000008697

Entity Name: WATERLEIGH PHASE 1 COMMUNITY ASSOCIATION, INC.

FILED Feb 06, 2018 Secretary of State CC5975581334

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

215 CELEBRATION PLACE

SUITE 115

CELEBRATION, FL 34747

# **Current Mailing Address:**

215 CELEBRATION PLACE SUITE 115

CELEBRATION, FL 34747 US

FEI Number: 47-2732867 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ACCESS MANAGEMENT 215 CELEBRATION PLACE SUITE 115

CELEBRATION, FL 34747 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: MICHAEL W LASTER 02/06/2018

Electronic Signature of Registered Agent Date

#### Officer/Director Detail:

Title PRESIDENT, DIRECTOR Title VP, DIRECTOR

Name ROBERTS, FRED Name DUNKELBERGER, JANE

Address 215 CELEBRATION PLACE Address 215 CELEBRATION PLACE

SUITE 115 SUITE 115

City-State-Zip: CELEBRATION FL 34747 City-State-Zip: CELEBRATION FL 34747

Title SECRETARY, DIRECTOR Title TREASURER, DIRECTOR

Name WILSON, STEPHEN Name CRONIN, MICHAEL

Address 215 CELEBRATION PLACE Address 215 CELEBRATION PLACE

SUITE 115 SUITE 115

City-State-Zip: CELEBRATION FL 34747 City-State-Zip: CELEBRATION FL 34747

Title VP, DIRECTOR

Name STURGESS, KATHLEEN

Address 215 CELEBRATION PLACE

**SUITE 115** 

City-State-Zip: CELEBRATION FL 34747

Electronic Signature of Signing Officer/Director Detail

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.