

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000012044

**FILED**  
**Jun 18, 2020**  
**Secretary of State**  
**5491087909CC**

**Entity Name:** FWA CORPORATION

**Current Principal Place of Business:**

10521 VERSAILLES BLVD.  
WELLINGTON, FL 33449

**Current Mailing Address:**

PO BOX 810321  
BOCA RATON, FL 33481 US

**FEI Number:** 82-3674054

**Certificate of Status Desired:** No

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

BELSKI, MICHAEL  
10521 VERSAILLES BLVD.  
WELLINGTON, FL 33449 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            DIR  
Name            HARRIS, JAMIE  
Address        5719 31ST COURT EAST  
City-State-Zip: BRADENTON FL 34203

Title            DIR  
Name            CLANCY, TRACI  
Address        9444 BOCA RIVER CIRCLE  
City-State-Zip: BOCA RATON FL 33434

Title            DIR  
Name            BONDURANT, ERIC  
Address        1913 FLORESTA VIEW DRIVE  
City-State-Zip: TAMPA FL 33618

Title            DIR  
Name            HODGES, HAL  
Address        2664 STONEBROOK CT. NE  
City-State-Zip: ROSWELL GA 30075

Title            DIR  
Name            PENTON, MARTHA  
Address        1747 OAK PARK LANE  
City-State-Zip: HELENA AL 35080

Title            DIR  
Name            MUNSON, TYSON  
Address        510 PINWOOD DR.  
City-State-Zip: OLDSMAR FL 34677

Title            PRES  
Name            BELSKI, MICHAEL  
Address        10521 VERSAILLES BLVD.  
City-State-Zip: WELLINGTON FL 33449

Title            T  
Name            BAKALAR, ALLAN  
Address        6000 TANGLEWOOD DRIVE NE  
City-State-Zip: SAINT PETERSBURG FL 33703

**Continues on page 2**

*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:** MICHAEL JOHN BELSKI

**PRESIDENT**

**06/18/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title S  
Name MARTIN, JOHN  
Address 1360 39TH AVE NE  
City-State-Zip: SAINT PETERSBURG FL 33703