411 S CENTRA FLAGLER BEA	-			
Current Mai	ing Address:			
	RAL AVE STE B EACH, FL 32136 US			
FEI Number: 86-1386535		Certificate of Status Desired: No		
Name and A	ddress of Current Registered Agent:			
411 S CENTRA	RTY SERVICES INC. L AVE STE B CH, FL 32136 US			
The above named	entity submits this statement for the purpose of changing its regis	tered office or regis	tered agent, or both, in the State of Flo	rida
	, , , , , , , , , , , , , , , , , , , ,	0	0, ,	liaal
SIGNATURE	LEA STOKES	U U		04/19/2023
SIGNATURE				
SIGNATURE	: LEA STOKES Electronic Signature of Registered Agent			04/19/2023
	: LEA STOKES Electronic Signature of Registered Agent	Title	VPD	04/19/2023
Officer/Diree	Electronic Signature of Registered Agent Ctor Detail :			04/19/2023
Officer/Direc	: LEA STOKES Electronic Signature of Registered Agent Ctor Detail : PD	Title	VPD	04/19/2023
Officer/Direc Title Name Address	:: LEA STOKES Electronic Signature of Registered Agent Ctor Detail : PD ROGERS, ZENZI	Title Name Address	VPD CSALOVSZKI, TIFFANY	04/19/2023
Officer/Direc Title Name Address	: LEA STOKES Electronic Signature of Registered Agent Ctor Detail : PD ROGERS, ZENZI 411 S CENTRAL AVE STE B	Title Name Address	VPD CSALOVSZKI, TIFFANY 411 S CENTRAL AVE STE B	04/19/2023
Officer/Direc Title Name Address City-State-Zip:	: LEA STOKES Electronic Signature of Registered Agent Ctor Detail : PD ROGERS, ZENZI 411 S CENTRAL AVE STE B FLAGLER BEACH FL 32136	Title Name Address	VPD CSALOVSZKI, TIFFANY 411 S CENTRAL AVE STE B	04/19/2023
Officer/Direc Title Name Address City-State-Zip: Title	: LEA STOKES Electronic Signature of Registered Agent Ctor Detail : PD ROGERS, ZENZI 411 S CENTRAL AVE STE B FLAGLER BEACH FL 32136 STD	Title Name Address	VPD CSALOVSZKI, TIFFANY 411 S CENTRAL AVE STE B	04/19/2023

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.

PD

SIGNATURE: ZENZI ROGERS

Electronic Signature of Signing Officer/Director Detail

FILED

04/19/2023 Date

## 2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000010888

## Entity Name: WEXFORD RESERVE HOMEOWNERS ASSOCIATION, INC.

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