

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37644

FILED
Apr 23, 2014
Secretary of State
CC3139354244

Entity Name: WESMERE MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business:

6972 LAKE GLORIA BLVD
ORLANDO, FL 32809

Current Mailing Address:

6972 LAKE GLORIA BLVD
ORLANDO, FL 32809 US

FEI Number: 59-3031270

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LELAND MANAGEMENT
6972 LAKE GLORIA BLVD
ORLANDO, FL 32809 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 PD
Name TIM, TONKOVICH
Address 6972 LAKE GLORIA
City-State-Zip: ORLANDO FL 32809

Title DIRECTOR
Name BERG, BILL
Address 6972 LAKE GLORIA BLVD
City-State-Zip: ORLANDO FL 32809

Title D
Name STRICKLAND, ED
Address 6972 LAKE GLORIA BLVD
City-State-Zip: ORLANDO FL 32809

Title VP
Name MACLAVAIN, STEPHANIE
Address 6972 LAKE GLORIA BLVD
City-State-Zip: ORLANDO FL 32809

Title DIRECTOR
Name MATTOS, CLAUDIA
Address 6972 LAKE GLORIA BLVD
City-State-Zip: ORLANDO FL 32809

Title TREASURER
Name SINGLETON, SAGE
Address 6972 LAKE GLORIA BLVD
City-State-Zip: ORLANDO FL 32809

Title SECRETARY
Name MATALUNI, MIKE
Address 6972 LAKE GLORIA BLVD
City-State-Zip: ORLANDO FL 32809

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: TIM TONKOVICH

PRESIDENT

04/23/2014

Electronic Signature of Signing Officer/Director Detail

Date