

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41677

Entity Name: WATER'S EDGE FORT MYERS, INC.**Current Principal Place of Business:**14801 LAGUNA DRIVE
FORT MYERS, FL 33908**Current Mailing Address:**P O BOX 100
SANIBEL, FL 33957 US**FEI Number:** 65-0312699**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MACKESY, STEVEN
C/O ISLAND MANAGEMENT
711 TARPON BAY ROAD
SANIBEL, FL 33957 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
Name WHEATCRAFT, BILL
Address 711 TARPON BAY RD
City-State-Zip: SANIBEL FL 33957

Title DIRECTOR
Name GARCIA, PHILLIP A
Address 711 TARPON BAY RD
City-State-Zip: SANIBEL FL 33957

Title DIRECTOR
Name NOLAN, PAUL
Address 711 TARPON BAY RD
City-State-Zip: SANIBEL FL 33957

Title DIRECTOR
Name KIRPSTEIN, JAN
Address 711 TARPON BAY RD
City-State-Zip: SANIBEL FL 33957

Title TREASURER
Name WOLFENDEN, WARREN
Address 711 TARPON BAY RD
City-State-Zip: SANIBEL FL 33957

Title VP
Name SALVANGO, KEN
Address 711 TARPON BAY RD
City-State-Zip: SANIBEL FL 33957

Title SECRETARY
Name DEMPSEY, CAROLE
Address 711 TARPON BAY RD
City-State-Zip: SANIBEL FL 33957

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: BILL WHEATCRAFT

PRESIDENT

04/10/2017

Electronic Signature of Signing Officer/Director Detail_____
Date