2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004175

Entity Name: WATERPARK PLACE VILLAGE ASSOCIATION, INC.

FILED
Apr 30, 2019
Secretary of State
0089273064CC

Current Principal Place of Business:

SOUTHWEST PROPERTY MANAGEMENT, INC.

1044 CASTELLO DR., STE. 206

NAPLES, FL 34103

Current Mailing Address:

SOUTHWEST PROPERTY MANAGEMENT, INC. 1044 CASTELLO DR., STE. 206 NAPLES, FL 34103 US

FEI Number: 65-0438867 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SOUTHWEST PROPERTY MANAGEMENT, INC. SOUTHWEST PROPERTY MANAGEMENT, INC. 1044 CASTELLO DR., STE.206 NAPLES, FL 34103 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: STEPHEN E. WILLIAMS 04/30/2019

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Address

Title PRESIDENT Title SECRETARY/TREASURER

Name PARISI, JOSEPH Name DINARDO, ANTHONY

Address C/O SOUTHWEST PROPERTY Address C/O SOUTHWEST PROPERTY MANAGEMENT, INC. Address C/O SOUTHWEST PROPERTY MANAGEMENT, INC.

NAGEINIENT, INC.

1044 CASTELLO DR., STE.206 1044 CASTELLO DR., STE. 206

City-State-Zip: NAPLES FL 34103 City-State-Zip: NAPLES FL 34103

Title VICE PRESIDENT Title DIRECTOR

Name WOODWARD, MARK J Name MCCORMACK, WILLIAM

Address C/O SOUTHWEST PROPERTY Address C/O ST. PIERRE AT PELICAN BAY

MANAGEMENT, INC. 6825 GRENADIERE #210

1044 CASTELLO DR., STE., 206 City-State-Zip: NAPLES FL 34108

City-State-Zip: NAPLES FL 34103

Title DIRECTOR

Name RUCHTY, NICK

Name MARKS, RON Address C/O ST, PIERRE AT PELICAN BAY

C/O ST. LAURENT AT PELICAN BAY
6849 AT GRENADIER BLVD., #1204
6849 AT GRENADIER BLVD., #1204
6849 AT GRENADIER BLVD., #1204

City-State-Zip: NAPLES FL 34108

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: JOSEPH PARISI PRESIDENT 04/30/2019