#### 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004668

Entity Name: WEKIVA RIVER PLAYERS, INC.

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FILED Feb 09, 2022 Secretary of State 8038504741CC

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

C/O DANA ANDERSON, ESQ. 2949 W. STATE ROAD434 SUITE 100 LONGWOOD, FL 32779

## **Current Mailing Address:**

P O BOX 915271

LONGWOOD, FL 32791 US

FEI Number: 59-3200294 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

ANDERSON, DANA K ESQ. C/O DANA ANDERSON, ESQ. 2949 W. STATE ROAD434 SUITE 100 LONGWOOD, FL 32779 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: DANA ANDERSON, ESQ. 02/09/2022

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title	TREASURER	Title	\/P
HILLE	IKEASUKEK	Tille	٧r

Name BOGSTAD, DAN Name MASON, STACY
Address P O BOX 915271 Address PO BOX 915271

City-State-Zip: LONGWOOD FL 32791 City-State-Zip: LONGWOOD FL 32791

TitlePRESIDENTTitleSECRETARYNameWILLIAMSON, BILLYNameKONNIE, KUBECAddressPO BOX 915271AddressP O BOX 915271

City-State-Zip: LONGWOOD FL 32779 City-State-Zip: LONGWOOD FL 32791

TitleDIRECTORTitleDIRECTORNameCROOKS, JENNYNameCLAIR, MIKEAddressP O BOX 915271AddressP O BOX 915271

City-State-Zip: LONGWOOD FL 32791 City-State-Zip: LONGWOOD FL 32791

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: BILLY WILLIAMSON

**PRESIDENT** 

02/09/2022