

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000000544

**Entity Name:** THE RESERVE AT WEDGEFIELD HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

206 S. ELM AVE  
SANFORD, FL 32771

**Current Mailing Address:**

P O BOX 1569  
SANFORD, FL 32772 US

**FEI Number:** 59-3532601

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ALL ABOUT MANAGEMENT, INC.  
206 S. ELM AVENUE  
SANFORD, FL 32771 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	DIRECTOR	Title	VICE PRESIDENT / TREASURER
Name	WRIGHT, BRIAN	Name	DAMICO, JOHN
Address	P.O. BOX 1569	Address	P O BOX 1569
City-State-Zip:	SANFORD FL 32772	City-State-Zip:	SANFORD FL 32772
Title	PRESIDENT	Title	DIRECTOR
Name	BATTAGLIA, MICHAEL	Name	DELFIN, MARIA
Address	P O BOX 1569	Address	P O BOX 1569
City-State-Zip:	SANFORD FL 32772	City-State-Zip:	SANFORD FL 32772
Title	DIRECTOR		
Name	ALESSANDRI, PATRICK		
Address	P O BOX 1569		
City-State-Zip:	SANFORD FL 32772		

*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: MICHAEL BATTAGLIA**

**PRESIDENT**

**03/21/2017**

Electronic Signature of Signing Officer/Director Detail

Date