

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000001367

**Entity Name:** WATERFORD PLACE OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1001 EAST ATLANTIC AVE., STE 202  
DELRAY BEACH, FL 33483

**Current Mailing Address:**

1000 MARKET STREET  
SUITE 300  
PORTSMOUTH, NH 03801

**FEI Number:** 65-1091970

**Certificate of Status Desired:** No

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

CRITCHFIELD, RICHARD H  
1001 E. ATLANTIC AVE.  
SUITE 201  
DELRAY BEACH, FL 33483 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 WALSH, MARK  
Address 1001 EAST ATLANTIC AVE., STE 202  
City-State-Zip: DELRAY BEACH FL 33483

Title VSTD  
Name WALSH, MICHAEL  
Address 1001 EAST ATLANTIC AVE., STE 202  
City-State-Zip: DELRAY BEACH FL 33483

Title VD  
Name MCMURRAIN, THOMAS T  
Address 1001 EAST ATLANTIC AVE., STE 202  
City-State-Zip: DELRAY BEACH FL 33483

Title D  
Name WALSH, WILLIAM  
Address 1000 MARKET STREET, STE 300  
City-State-Zip: PORTSMOUTH NH 03801

*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:** WILLIAM WALSH

**DIRECTOR**

**01/15/2018**

Electronic Signature of Signing Officer/Director Detail

Date