

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 758934

**Entity Name:** WATER OAK HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Feb 18, 2021**  
**Secretary of State**  
**5862372842CC**

**Current Principal Place of Business:**

11555 CENTRAL PARKWAY  
801  
JACKSONVILLE, FL 32224

**Current Mailing Address:**

C/O FIRST COAST ASSOCIATION MANAGEMENT  
11555 CENTRAL PARKWAY SUITE801  
JACKSONVILLE, FL 32224 US

**FEI Number: 59-2102121**

**Certificate of Status Desired: No**

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

FIRST COAST ASSOCIATION MANAGEMENT  
C/O FIRST COAST ASSOCIATION MANAGEMENT  
11555 CENTRAL PARKWAY801  
JACKSONVILLE, FL 32224 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: MARGARET STOREY, CFO**

**02/18/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title T  
Name MULDOON, DONALD  
Address 11555 CENTRAL PARKWAY  
801  
City-State-Zip: JACKSONVILLE FL 32224

Title P  
Name KREMLER, KATHY  
Address 11555 CENTRAL PARKWAY  
801  
City-State-Zip: JACKSONVILLE FL 32224

Title S  
Name VANDERSCHOOT, FRANK  
Address 11555 CENTRAL PARKWAY  
801  
City-State-Zip: JACKSONVILLE FL 32224

Title DIRECTOR  
Name RUSSELL, STEVE  
Address 11555 CENTRAL PARKWAY  
801  
City-State-Zip: JACKSONVILLE FL 32224

Title VP  
Name GRAHAM, ROBERT  
Address 11555 CENTRAL PARKWAY  
801  
City-State-Zip: JACKSONVILLE FL 32224

Title DIRECTOR  
Name GREENWOOD, ALLISON  
Address C/O FIRST COAST ASSOCIATION  
MANAGEMENT  
11555 CENTRAL PARKWAY SUITE801  
City-State-Zip: JACKSONVILLE FL 32224

Title DIRECTOR  
Name ABOUD, EDUARDO  
Address C/O FIRST COAST ASSOCIATION  
MANAGEMENT  
11555 CENTRAL PARKWAY SUITE801  
City-State-Zip: JACKSONVILLE FL 32224

*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: KATHY KREMLER**

**PRESIDENT**

**02/18/2021**

Electronic Signature of Signing Officer/Director Detail

Date