

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006153

Entity Name: WATERFORD CHASE EAST HOMEOWNERS ASSOCIATION, INC.**FILED**
Apr 29, 2018
Secretary of State
CC8401767515**Current Principal Place of Business:**1809 E. BROADWAY STREET
SUITE 408
OVIEDO, FL 32765**Current Mailing Address:**1809 E. BROADWAY STREET
SUITE 408
OVIEDO, FL 32675 US**FEI Number: 59-3714093****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**NEXUS COMMUNITY MANAGEMENT, LLC
1809 E. BROADWAY STREET
SUITE 408
OVIEDO, FL 32765 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
Name REUTER, WILLIAM H
Address 1809 E. BROADWAY STREET
SUITE 408
City-State-Zip: OVIEDO FL 32765

Title PRESIDENT
Name REBER, JOHN C
Address 1809 E. BROADWAY STREET
SUITE 408
City-State-Zip: OVIEDO FL 32765

Title TREASURER
Name MELANSON, SCOTT E.
Address 1809 E. BROADWAY STREET
SUITE 408
City-State-Zip: OVIEDO FL 32765

Title DIRECTOR
Name MEISTER, DAVID
Address 1809 E. BROADWAY STREET
SUITE 408
City-State-Zip: OVIEDO FL 32765

Title SECRETARY, VP
Name MAZOUZI, AMAL
Address 1809 E. BROADWAY STREET
SUITE 408
City-State-Zip: OVIEDO FL 32765

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: AMAL MAZOUZI**SECRETARY****04/29/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date