

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13176

**Entity Name:** WALDEN LAKE COMMUNITY ASSOCIATION, INC.**Current Principal Place of Business:**3035 GRIFFIN BOULEVARD  
PLANT CITY, FL 33566**Current Mailing Address:**4131 GUNN HIGHWAY  
TAMPA, FL 33618 US**FEI Number:** 59-2633615**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MELTON, H. WEB  
1801 N HIGHLAND AVENUE  
TAMPA, FL 33602 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:** H. WEB MELTON

04/24/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name BLIZZARD, BOBBY  
Address 4131 GUNN HIGHWAY  
City-State-Zip: TAMPA FL 33618

Title DIRECTOR  
Name PAGE, RAY  
Address 4131 GUNN HIGHWAY  
City-State-Zip: TAMPA FL 33618

Title VP  
Name ORRICO, DAN  
Address 4131 GUNN HIGHWAY  
City-State-Zip: TAMPA FL 33618

Title SECRETARY  
Name NELSON, AMBER  
Address 4131 GUNN HIGHWAY  
City-State-Zip: TAMPA FL 33618

Title DIRECTOR  
Name SOLTAU, MONA  
Address 4131 GUNN HIGHWAY  
City-State-Zip: TAMPA FL 33618

Title PRESIDENT  
Name COLLINS, SCOTT  
Address 4131 GUNN HIGHWAY  
City-State-Zip: TAMPA FL 33618

Title TREASURER  
Name SISCO, ELLEN  
Address 4131 GUNN HIGHWAY  
City-State-Zip: TAMPA FL 33618

Title DIRECTOR  
Name PICCARI, MICHELLE  
Address 4131 GUNN HIGHWAY  
City-State-Zip: TAMPA FL 33618

**Continues on page 2**

*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:** SCOTT COLLINS

PRESIDENT

04/24/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	PARRILLO, JASON
Address	4131 GUNN HIGHWAY
City-State-Zip:	TAMPA FL 33618