

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13990

**Entity Name:** WATERFORD COURTYARDS AT CRYSTAL LAKE NORTH HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Mar 09, 2024**  
**Secretary of State**  
**8658416257CC**

**Current Principal Place of Business:**

C/O BROCK PROPERTY MANAGEMENT  
7401 WILES ROAD  
CORAL SPRINGS, FL 33067

**Current Mailing Address:**

C/O BROCK PROPERTY MANAGEMENT  
7401 WILES ROAD  
CORAL SPRINGS, FL 33067 US

**FEI Number: 65-0000872**

**Certificate of Status Desired: No**

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

VALANCY & REED, P.A.  
310 SE 13 STREET  
FORT LAUDERDALE, FL 33316 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: STEVE VALANCY**

**03/09/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            WALKER, ROSARIO  
Address        C/O BROCK PROPERTY  
                  MANAGEMENT  
                  7401 WILES ROAD  
City-State-Zip: CORAL SPRINGS FL 33067

Title            VP  
Name            ANGER, TAMI  
Address        C/O BROCK PROPERTY  
                  MANAGEMENT  
                  7401 WILES ROAD  
City-State-Zip: CORAL SPRINGS FL 33067

Title            SECRETARY  
Name            CHEW TRUST, KIM  
Address        C/O BROCK PROPERTY  
                  MANAGEMENT  
                  7401 WILES ROAD  
City-State-Zip: CORAL SPRINGS FL 33067

Title            TREASURER  
Name            COHALL, MARGIE  
Address        C/O BROCK PROPERTY  
                  MANAGEMENT  
                  7401 WILES ROAD  
City-State-Zip: CORAL SPRINGS FL 33067

*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: WALKER, ROSARIO**

**PRESIDENT**

**03/09/2024**

Electronic Signature of Signing Officer/Director Detail

Date