

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N34100

**FILED**  
**Feb 15, 2025**  
**Secretary of State**  
**0510061998CC**

**Entity Name:** CUNNINGHAM CREEK UNIT III HOME OWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

1969 WEB FOOT PLACE  
ST. JOHNS, FL 32259

**Current Mailing Address:**

PO BOX 600071  
JACKSONVILLE, FL 32260

**FEI Number: 59-3023369**

**Certificate of Status Desired: No**

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

WANTZ, CONNIE B  
1969 WEB FOOT PLACE  
ST. JOHNS, FL 32259 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: CONNIE B. WANTZ**

**02/15/2025**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            CLAY, GARRY C  
Address        1931 WEB FOOT PLACE  
City-State-Zip: ST. JOHNS FL 32259

Title            AT LARGE  
Name            CREWS, SUSAN  
Address        2295 HAWKCREST DRIVE EAST  
City-State-Zip: ST. JOHNS FL 32259

Title            TREASURER  
Name            WANTZ, CONNIE  
Address        1969 WEB FOOT DRIVE  
City-State-Zip: ST. JOHNS FL 32259

Title            MEMBER-AT-LARGE  
Name            SMITH, MARY L  
Address        1925 WILLOW GROUSE PLACE  
City-State-Zip: ST. JOHNS FL 32259

Title            VP  
Name            WALKER, JONATHAN  
Address        2220 HAWKCREST DRIVE EAST  
City-State-Zip: SAINT JOHNS FL 32259

Title            AT LARGE  
Name            NAPOLITANO, JOSH  
Address        2145 HAWKCREST DRIVE EAST  
City-State-Zip: SAINT JOHNS FL 32259

Title            SECRETARY  
Name            PARNELL, MARY  
Address        2072 HAWKCREST DRIVE EAST  
City-State-Zip: SAINT JOHN FL 32259

Title            AT LARGE  
Name            PARNELL, JAMES  
Address        2072 HAWKCREST DRIVE EAST  
City-State-Zip: SAINT JOHNS FL 32259

*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: CONNIE BEVAN WANTZ**

**TREASURER**

**02/15/2025**

Electronic Signature of Signing Officer/Director Detail

Date