

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

DOCUMENT# N97000004800

**Entity Name:** WATER OAK SUBDIVISION HOMEOWNERS' ASSOCIATION, INC

**FILED**  
**Feb 07, 2024**  
**Secretary of State**  
**8076288398CC**

**Current Principal Place of Business:**

2108 EAST EDGEWOOD DRIVE  
LAKELAND, FL 33803

**Current Mailing Address:**

2108 EAST EDGEWOOD DRIVE  
LAKELAND, FL 33803 US

**FEI Number: 90-0041008**

**Certificate of Status Desired: No**

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

AIA PROPERTY MANAGEMENT INC  
2108 EAST EDGEWOOD DRIVE  
LAKELAND, FL 33803 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            PRESIDENT  
Name            GERICKE, CATHY  
Address        2108 EAST EDGEWOOD DRIVE  
City-State-Zip: LAKELAND FL 33803

Title            VP  
Name            GIBSON, DON  
Address        2108 EAST EDGEWOOD DRIVE  
City-State-Zip: LAKELAND FL 33803

Title            SECRETARY  
Name            GERICKE, MIKE  
Address        2108 EAST EDGEWOOD DRIVE  
City-State-Zip: LAKELAND FL 33803

Title            TREASURER  
Name            FRYE, MICHAEL  
Address        2108 EAST EDGEWOOD DRIVE  
City-State-Zip: LAKELAND FL 33803

Title            DIRECTOR  
Name            RUSSELL, DIANE  
Address        2108 EAST EDGEWOOD DRIVE  
City-State-Zip: LAKELAND FL 33803

Title            DIRECTOR  
Name            MCPHERSON, CAROLE  
Address        2108 EAST EDGEWOOD DRIVE  
City-State-Zip: LAKELAND FL 33803

Title            DIRECTOR  
Name            MEYER, STEPHANIE  
Address        2108 E. EDGEWOOD DR  
City-State-Zip: LAKELAND FL 33803

*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: CATHY GERICKE**

**PRESIDENAT**

**02/07/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date