

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726951

Entity Name: ARROWHEAD GOLF & TENNIS CLUB NUMBER ONE
ASSOCIATION, INC.**Current Principal Place of Business:**6175 NW 167 STREET
SUITE G9
MIAMI, FL 33015**Current Mailing Address:**6175 NW 167 STREET
SUITE G9
MIAMI, FL 33015 US**FEI Number: 59-1521369****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**RANDALL, ROGER K
621 N.W. 53RD STREET, STE 300
BOCA RATON, FL 33482 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	VP
Name	WEISSMAN, LEE
Address	6175 NW 167 STREET SUITE G9
City-State-Zip:	MIAMI FL 33015

Title	TREASURER
Name	GOLDSTEIN, ALAN
Address	6175 NW 167 STREET SUITE G9
City-State-Zip:	MIAMI FL 33015

Title	S
Name	KLEIN, STANLEY
Address	6175 NW 167 STREET SUITE G9
City-State-Zip:	MIAMI FL 33015

Title	P
Name	STONE, KEVIN
Address	6175 NW 167 STREET SUITE G9
City-State-Zip:	MIAMI FL 33015

Title	DIRECTOR
Name	SCHEIBL, JOHN
Address	6175 NW 167 STREET SUITE G9
City-State-Zip:	MIAMI FL 33015

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: KEVIN STONE**P****04/28/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date