

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01327

Entity Name: GOLDEN RAINTREE V HOMEOWNERS' ASSOCIATION, INC.**FILED**
Mar 13, 2023
Secretary of State
7261047760CC**Current Principal Place of Business:**C/O REALMANAGE
902 CLINT MOORE RD SUITE 110
BOCA RATON, FL 33487**Current Mailing Address:**C/O REALMANAGE
P O BOX 803555
DALLAS, TX 75380 US**FEI Number:** 59-2376953**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BROUGH, CHADROW & LEVINE, P.A.
C/O BROUGH, CHADROW & LEVINE, P.A.
2149 NORTH COMMERCE PARKWAY
WESTON, FL 33326 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:** SCOTT LEVINE

03/13/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	WYSOCKY, RAY
Address	C/O REALMANAGE 902 CLINT MOORE RD SUITE 110
City-State-Zip:	BOCA RATON FL 33487

Title	TREASURER
Name	HIGGINS, BARBARA
Address	C/O REALMANAGE 902 CLINT MOORE RD SUITE 110
City-State-Zip:	BOCA RATON FL 33487

Title	SECRETARY
Name	HARLEY, LESLIE
Address	C/O REALMANAGE 902 CLINT MOORE RD SUITE 110
City-State-Zip:	BOCA RATON FL 33487

Title	DIRECTOR
Name	HARISSON, BRENDA
Address	C/O REALMANAGE 902 CLINT MOORE RD SUITE 110
City-State-Zip:	BOCA RATON FL 33487

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: RAY WYSOCKY

PRESIDENT

03/13/2023

Electronic Signature of Signing Officer/Director Detail

Date