

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008953

Entity Name: MALLORY SQUARE HOMEOWNERS' ASSOCIATION, INC.

FILED
Feb 13, 2023
Secretary of State
4312426898CC

Current Principal Place of Business:

C/O GRS MANAGEMENT ASSOCIATES
3900 WOODLAKE BLVD, SUITE 309
LAKE WORTH, FL 33463

Current Mailing Address:

C/O GRS MANAGEMENT ASSOCIATES
3900 WOODLAKE BLVD, SUITE 309
LAKE WORTH, FL 33463

FEI Number: 16-1663298

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SJW LAW GROUP, PLLC
12300 SOUTH SHORE BOULEVARD
SUITE 202
WELLINGTON, FL 33414 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 J WORTMAN

02/13/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name FORD, AL
Address GRS MANAGEMENT ASSOC.
 3900 WOODLAKE BLVD SUITE 309
City-State-Zip: LAKE WORTH FL 33463

Title TREASURER
Name KRAES, BERNEDETTE
Address GRS MANAGEMENT ASSOC.
 3900 WOODLAKE BLVD SUITE 309
City-State-Zip: LAKE WORTH FL 33463

Title SECRETARY
Name LORRAINE, KATZ
Address GRS MANAGEMENT ASSOC.
 3900 WOODLAKE BLVD SUITE 309
City-State-Zip: LAKE WORTH FL 33463

Title VP
Name HAVLICSEK, ROBERT
Address GRS MANAGEMENT ASSOC.
 3900 WOODLAKE BLVD SUITE 309
City-State-Zip: LAKE WORTH FL 33463

Title VP
Name MELANDRI, FRANCESCO
Address C/O GRS MANAGEMENT ASSOCIATES
 3900 WOODLAKE BLVD, SUITE 309
City-State-Zip: LAKE WORTH FL 33463

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: AL FORD

PRESIDENT

02/13/2023

Electronic Signature of Signing Officer/Director Detail

Date