#### **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07415

Entity Name: GOLF VIEW HOME OWNERS INCORPORATED

FILED
Mar 02, 2023
Secretary of State
7381159417CC

## **Current Principal Place of Business:**

901 N.W. 31ST AVE

POMPANO BEACH, FL 33069

## **Current Mailing Address:**

C/O MAXINE GROVER 3529 EAGLE.

POMPANO BEACH, FL 33069 US

FEI Number: 59-6508460 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

GROVER, MAXINE C/O MAXINE GROVER 3529 EAGLE POMPANO BEACH, FL 33069 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: MAXINE GROVER 03/02/2023

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title TREASURER Title 1ST VP

NameGROVER, MAXINENamePICARD, MARIOAddress3529 EAGLEAddress3351 FAIRWAY

City-State-Zip: POMPANO BEACH FL 33069 City-State-Zip: POMPANO BEACH FL 33069

Title PRESIDENT Title DIRECTOR

Name BERNARD, HARRY Name BISSON, REMI

Address 750 BIRDIE LANE Address 802 GOLFVIEW BLVD

City-State-Zip: POMPANO BEACH FL 33069 City-State-Zip: POMPANO BEACH FL 33069

Title DIRECTOR Title 2ND VICE PRESIDENT

Name THIBAULT, SHONNELL Name COLE, LOUIS
Address 3492 GOLFVIEW BLVD Address 769 PUTTER

City-State-Zip: POMPANO BEACH FL 33069 City-State-Zip: POMPANO BEACH FL 33069

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: MAXINE GROVER

Electronic Signature of Signing Officer/Director Detail

03/02/2023