

2018 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N14321

Entity Name: GOLFSIDE VILLAGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1656 GOLFSIDE VILLAGE CT.
APOPKA, FL 32712

Current Mailing Address:

1656 GOLFSIDE VILLAGE CT.
APOPKA, FL 32712 US

FEI Number: 59-2634824

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VALLANCOURT, JOYCE
1656 GOLFSIDE VILLAGE CT.
APOPKA, FL 32712 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: JOYCE VALLANCOURT

02/26/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name VALLANCOURT, JOHN
Address 1656 GOLFSIDE VILLAGE CT.
City-State-Zip: APOPKA FL 32712

Title TREASURER
Name VALLANCOURT, JOYCE
Address 1656 GOLFSIDE VILLAGE CT.
City-State-Zip: APOPKA FL 32712

Title VP
Name NUEBEL, JAMES
Address 1640 GOLFSIDE VILLAGE CT.
City-State-Zip: APOPKA FL 32712

Title SECRETARY
Name FRAY, JANE
Address 1578 GOLFSIDE VILLAGE BLVD.
City-State-Zip: APOPKA FL 32712

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: JOHN VALLANCOURT

PRESIDENT

02/26/2018

Electronic Signature of Signing Officer/Director Detail

Date