

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16771

FILED
Feb 27, 2015
Secretary of State
CC0235857344**Entity Name:** ST. ANDREWS AT GOLFVIEW CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**14849 HOLE-IN-ONE CIRCLE
FORT MYERS, FL 33919**Current Mailing Address:**14849 HOLE-IN-ONE CIRCLE
FORT MYERS, FL 33919 US**FEI Number: 65-0034763****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CATOE, DENNIS
14849 HOLE IN ONE CIRCLE
FORT MYERS, FL 33919 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	SDTR
Name	FLANDERS, MICKIE
Address	14831 HOLE IN ONE CIRCLE
City-State-Zip:	FT MYERS FL 33919

Title	DIR
Name	VALOIS, HOWARD
Address	14831 HOLE IN ONE CIRCLE #104
City-State-Zip:	FT. MYERS FL 33919

Title	DIR
Name	PHAIR, RAY
Address	14831 HOLE-IN-ONE CIRCLE, S.W. #205
City-State-Zip:	FT. MYERS FL 33919

Title	P
Name	BAKER, DAVID
Address	14831 HOLE-IN-ONE CIR, # 403
City-State-Zip:	FORT MYERS FL 33919

Title	VP
Name	RISTING, RON
Address	14831 HOLE-IN-ONE-CIRCLE #105
City-State-Zip:	FT MYERS FL 33919

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: DAVID BAKER**PRESIDENT****02/27/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date