# 2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N22592

Entity Name: MEADOWLAND COVE HOMEOWNERS ASSOCIATION, INC.

FILED
Dec 22, 2023
Secretary of State
3592191238CC

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

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

## **Current Mailing Address:**

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

FEI Number: 65-0006825 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

STOLOFF AND MANOFF, P.A. 1818 AUSTRALIAN AVE. SO. #400 WEST PALM BEACH, FL 33409 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 A STOLOFF 12/22/2023

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

TitlePRESIDENTTitleV. PRESIDENT, TREASURERNameBALCOMB, STEVENameSMITH, ROBERT MICHAEL

Address C/O GRS MANAGEMENT ASSOCIATES Address C/O GRS MANAGEMENT ASSOCIATES

3900 WOODLAKE BLVD SUITE 309 3900 WOODLAKE BLVD SUITE 309

City-State-Zip: LAKE WORTH FL 33463 City-State-Zip: LAKE WORTH FL 33463

Title SECRETARY Title DIRECTOR

Name MARKEE, JENNIFER Name THOMPSON, ROBIN

Address C/O GRS MANAGEMENT ASSOCIATES Address C/O GRS MANAGEMENT ASSOCIATES

3900 WOODLAKE BLVD SUITE 309 3900 WOODLAKE BLVD SUITE 309

City-State-Zip: LAKE WORTH FL 33463 City-State-Zip: LAKE WORTH FL 33463

**PRESIDENT** 

SIGNATURE: STEVE BALCOMB

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.