

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000002723

**Entity Name:** FOREST VIEW VILLAGE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O CAROLINA MANAGEMENT SERVICES, INC.  
6778 LANTANA ROAD SUITE 9  
LAKE WORTH, FL 33467

**Current Mailing Address:**

CAROLINA MANAGEMENT SERVICES, INC.  
P.O. BOX 740425  
BOYNTON BEACH, FL 33474 US

**FEI Number:** 65-0743948

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KRAVIT, CORY  
KRAVIT LAW, P.A.  
1801 N. MILITARY TRAIL SUITE 120  
BOCA RATON, FL 33431 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:** CORY KRAVIT

01/05/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            OLENDER, STEPHEN  
Address        C/O CAROLINA MANAGEMENT  
                  SERVICES, INC.  
                  P.O. BOX 740425  
City-State-Zip: BOYNTON BEACH FL 33474

Title            TREASURER  
Name            TARTAGLIA, SHAWN  
Address        C/O CAROLINA MANAGEMENT  
                  SERVICES, INC.  
                  P.O. BOX 740425  
City-State-Zip: BOYNTON BEACH FL 33474

Title            DIRECTOR  
Name            MOTAMEDIAN, MICHAEL  
Address        C/O CAROLINA MANAGEMENT  
                  SERVICES, INC.  
                  P.O. BOX 740425  
City-State-Zip: BOYNTON BEACH FL 33474

*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:** SHAWN TARTAGLIA

**TREASURER**

01/05/2024

Electronic Signature of Signing Officer/Director Detail

Date