

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000006197

**Entity Name:** GOLF RIDGE OF ORLANDO CONDOMINIUM ASSOCIATION, INC.**FILED**  
**Mar 23, 2021**  
**Secretary of State**  
**1393084289CC****Current Principal Place of Business:**1320 N SEMORAN BLVD STE 100  
ORLANDO, FL 32807**Current Mailing Address:**1320 N SEMORAN BLVD STE 100  
ORLANDO, FL 32807 US**FEI Number: 59-3543590****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**TOWERS PROPERTY MANAGEMENT, INC.  
1320 N SEMORAN BLVD STE 100  
ORLANDO, FL 32807 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: BENJAMIN ISIP****03/23/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	VP
Name	HEAD, PATRICIA
Address	1320 N SEMORAN BLVD STE 100
City-State-Zip:	ORLANDO FL 32807

Title	DIRECTOR
Name	NYARADY, GLAUCIA
Address	1320 N SEMORAN BLVD STE 100
City-State-Zip:	ORLANDO FL 32807

Title	DIRECTOR
Name	WARD, NANCY C
Address	1320 N SEMORAN BLVD STE 100
City-State-Zip:	ORLANDO FL 32807

Title	PRESIDENT
Name	SHERMAN, IRIS
Address	1320 N SEMORAN BLVD STE 100
City-State-Zip:	ORLANDO FL 32807

Title	SECRETARY, TREASURER
Name	ELKHOLI, ELIZABETH
Address	1320 N SEMORAN BLVD STE 100
City-State-Zip:	ORLANDO FL 32807

*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: IRIS SHERMAN****PRESIDENT****03/23/2021**

Electronic Signature of Signing Officer/Director Detail

Date