2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2012
Secretary of State

DOCUMENT# N46384

Entity Name: MUIRFIELD AT GOLFVIEW CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

14849 HOLE-IN-ONE CIRCLE
FT MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

14849 HOLE-IN-ONE CIRCLE
FT MYERS, FL 33919 US

New Mailing Address:

FEI Number: 65-0343138 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CATOE, DENNIS
14849 HOLE IN ONE CIRCLE
FORT MYERS, FL 33919 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: T
Name: JENSON, JAY
Address: 14891 HOLE IN ONE CIRCLE #308
City-St-Zip: FORT MYERS, FL 33919

Title: PD
Name: COLDIRON, JAMES
Address: 14891 HOLE-IN-ONE CIRCLE
City-St-Zip: FORT MYERS, FL 33919

Title: SD
Name: CATAURO, BARBARA
Address: 14849 HOLE-IN-ONE #305
City-St-Zip: FORT MYERS, FL 33919

Title: D
Name: LAMPHERE, TOM
Address: 14891 HOLE IN ONE CIRCLE #PH6
City-St-Zip: FT. MYERS, FL 33919

Title: VP
Name: HODOR, RONALD
Address: 14891 HOLE-IN-ONE CIRCLE #PH8
City-St-Zip: FORT 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: JAMES COLDIRON PD 03/09/2012
Electronic Signature of Signing Officer or Director Date