## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 730719** 

Entity Name: GRANDVIEW HEIGHTS HOMEOWNERS' ASSOCIATION INC.

**FILED** Apr 22, 2020 **Secretary of State** 8779399227CC

# **Current Principal Place of Business:**

**GRANDVIEW HEIGHTS** CRESTVIEW, FL 32536

# **Current Mailing Address:**

**GRANDVIEW HEIGHTS** P O BOX 601 CRESTVIEW, FL 32536

Certificate of Status Desired: No FEI Number: 59-2370369

## Name and Address of Current Registered Agent:

ARENZ, DAVID 1421 QUAIL RIDGE CRESTVIEW, FL 32539 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: DAVID ARENZ 04/22/2020

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title **PRESIDENT** Title **TREASURER** Name ARENZ, DAVID Name JAMMER, LYNDA Address Address

**GRANDVIEW HEIGHTS** P O BOX 601

**GRANDVIEW HEIGHTS** 

P O BOX 601

City-State-Zip: CRESTVIEW FL 32536 City-State-Zip: CRESTVIEW FL 32536

Title VΡ Title SECRETARY

COGAN. DARREN Name Name ALLRED. ANNETTE

**GRANDVIEW HEIGHTS** Address **GRANDVIEW HEIGHTS** Address

P O BOX 601 P O BOX 601

City-State-Zip: CRESTVIEW FL 32536 City-State-Zip: CRESTVIEW FL 32536

Title DIRECTOR Title DIRECTOR Name RICE. MIKE Name TEEL. JENNY

Address **GRANDVIEW HEIGHTS** Address **GRANDVIEW HEIGHTS** 

P O BOX 601 P O BOX 601

CRESTVIEW FL 32536 City-State-Zip: CRESTVIEW FL 32536 City-State-Zip:

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: LYNDA JAMMER TREASURER Electronic Signature of Signing Officer/Director Detail

04/22/2020