

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 757310

**Entity Name:** GOLF VIEW CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2727 GOLF LAKE CIRCLE  
MELBOURNE, FL 32935

**Current Mailing Address:**

1505 N. HWY A1A  
#501  
INDIALANTIC, FL 32903 US

**FEI Number:** 59-2078213

**Certificate of Status Desired:** No

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

NICOLETTE, ROBERT MGR  
1505 N. HWY A1A  
#501  
INDIALANTIC, FL 32903 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:** ROBERT NICOLETTE

04/29/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DTR  
Name FARIAS, MONIQUE  
Address GOLF LAKE CR UNIT 324  
City-State-Zip: MELBOURNE FL 32935

Title DVP  
Name SELWYN, SOL  
Address 2720 GOLF LAKE DR., #113  
City-State-Zip: MELBOURNE FL 32935

Title DP  
Name CUSHWAY, DOROTHY  
Address 2720 GOLF LAKE CR #1114  
City-State-Zip: MELBOURNE FL 32935

Title MANAGER  
Name NICOLETTE, ROBERT MGR  
Address 1505 N. HWY A1A  
#501  
City-State-Zip: INDIALANTIC FL 32903

*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:** ROBERT NICOLETTE

MGR

04/29/2016

Electronic Signature of Signing Officer/Director Detail

Date