

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763365

Entity Name: GOLDENROD VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O FLARENT INC. 1488 SEMINOLA BLVD
CASSELBERRY, FL 32707

Current Mailing Address:

C/O FLARENT INC
1488 SEMINOLA BLVD
CASSELBERRY, FL 32707 US

FEI Number: 59-2214618

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SPEAK, JESSICA A
1488 SEMINOLA BLVD
CASSELBERRY, FL 32707 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: JESSICA SPEAK

03/01/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name BERNS, ALICE
Address C/O FLARENT INC. 1488 SEMINOLA BLVD
City-State-Zip: CASSELBERRY FL 32707

Title PRESIDENT
Name BURKE, KATHY
Address C/O FLARENT INC. 1488 SEMINOLA BLVD
City-State-Zip: CASSELBERRY FL 32707

Title SECRETARY
Name THOMAS, BONNIE
Address C/O FLARENT INC. 1488 SEMINOLA BLVD
City-State-Zip: CASSELBERRY FL 32707

Title DIRECTOR
Name MARSHALL-WITHERS, DOLLIE
Address C/O FLARENT INC. 1488 SEMINOLA BLVD
City-State-Zip: CASSELBERRY FL 32707

Title TREASURER, VP
Name JAMES, MICHELLE
Address C/O FLARENT INC. 1488 SEMINOLA BLVD
City-State-Zip: CASSELBERRY FL 32707

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: KATHY BURKE

PRESIDENT

03/01/2018

Electronic Signature of Signing Officer/Director Detail

Date