## 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00644

Entity Name: WESTVIEW CONDOMINIUM ASSOCIATION NO. TEN, INC.

**FILED** Feb 15, 2022 **Secretary of State** 9521024442CC

## **Current Principal Place of Business:**

1494 NW 97 TERRACE PEMBROKE PINES. FL 33024

## **Current Mailing Address:**

C/O TDSUNSHINE PROPERTY MANAGEMENT P.O. BOX 122015 FORT LAUDERDALE. FL 33312

FEI Number: 59-2377061 Certificate of Status Desired: No.

## Name and Address of Current Registered Agent:

TDSUNSHINE PROPERTY MANAGEMENT LLC 8181 W. BROWARD BLVD SUITE 380 PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

TREASURER Title Title **PRESIDENT** 

KALINSKY, BENJAMIN Name Name NUSSBAUM, ELLEN

Address C/O TDSUNSHINE PROPERTY Address C/O TDSUNSHINE PROPERTY

MANAGEMENT MANAGEMENT P.O. BOX 122015 P.O. BOX 122015

City-State-Zip: FORT LAUDERDALE FL 33312 City-State-Zip: FORT LAUDERDALE FL 33312

Title **SECRETARY** Title

Name SHANOR, CAROLYNE Name CLINTON, SHERRY ANN

Address C/O TDSUNSHINE PROPERTY Address PO BOX 122015

**MANAGEMENT** City-State-Zip: FORT LAUDERDALE FL 33312

FORT LAUDERDALE FL 33312 City-State-Zip:

P.O. BOX 122015

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: CAROLYNE SHANOR

**SECRETARY** 

02/15/2022