### 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005677

Entity Name: ENGLEWOOD HARBOURVIEW CONDOMINIUM ASSOCIATION,

INC.

FILED Feb 04, 2024 Secretary of State 7557573507CC

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

1410-1420 BEACH RD. ENGLEWOOD, FL 34223

### **Current Mailing Address:**

1811 ENGLEWOOD RD., #215 ENGLEWOOD, FL 34223 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

FARRISH, NATALIE 245 WHITE MARSH LANE ROTONDA WEST, FL 33947 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: NATALIE FARRISH 02/04/2024

Electronic Signature of Registered Agent Date

# Officer/Director Detail:

TitlePRESIDENTTitleSECRETARYNameBALDWIN, JOENameKOVACIC, MICHAELAddress4028 BRANDYWINE POINTE BLVD.Address1733 STATE ST.

City-State-Zip: OLD HICKORY, TN 37138 City-State-Zip: WEST OLIVE, MI 49460

Title VP Title TREASURER

NamePOSTLE, JOHNNameSCHROEDER, BRADAddress13177 NORTHPOINTE CIRCLEAddress775 RIDGECREST RD.City-State-Zip:STRONGSVILLE OH 44136City-State-Zip:AKRON OH 44303

Title TREASURER Title DIRECTOR

NameSCHROEDER, BRADNameWILSON, BRUCEAddress775 RIDGECREST RD.Address200 EAST LAKE RD.City-State-Zip:AKRON OH 44303City-State-Zip: DERUYTER NY

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: JOE BALDWIN

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

02/04/2024