

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000005129

**FILED**  
**Jan 10, 2022**  
**Secretary of State**  
**9440040917CC**

**Entity Name:** THE COURTYARDS OF GRAND PALMS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O FIRSTSERVICE RESIDENTIAL  
2950 N 28 TERRACE  
HOLLYWOOD, FL 33020

**Current Mailing Address:**

C/O FIRSTSERVICE RESIDENTIAL  
2950 N 28 TERRACE  
HOLLYWOOD, FL 33020 US

**FEI Number:** 65-0660573

**Certificate of Status Desired:** No

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

VALANCY & REED, P.A.  
310 SE 13TH STREET  
FORT LAUDERDALE, FL 33316 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 :**

Title            PRESIDENT  
Name            RIGGOTT, VICTORIA  
Address        C/O FIRSTSERVICE RESIDENTIAL  
                  2950 N 28 TERRACE  
City-State-Zip: HOLLYWOOD FL 33020

Title            VP  
Name            QUINTANA, MARIA  
Address        2950 N 28TH TERRACE  
City-State-Zip: HOLLYWOOD FL 33020

Title            TREASURER  
Name            VEGA, LUIS  
Address        C/O FIRSTSERVICE RESIDENTIAL  
                  2950 N 28 TERRACE  
City-State-Zip: HOLLYWOOD FL 33020

Title            DIRECTOR  
Name            JEREZ, NICKY  
Address        C/O FIRSTSERVICE RESIDENTIAL  
                  2950 N 28 TERRACE  
City-State-Zip: HOLLYWOOD FL 33020

Title            SECRETARY  
Name            ROMERO, MATEO  
Address        C/O FIRSTSERVICE RESIDENTIAL  
                  2950 N 28 TERRACE  
City-State-Zip: HOLLYWOOD FL 33020

*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:** MATEO ROMERO

**SEC.**

01/10/2022

Electronic Signature of Signing Officer/Director Detail

Date