


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2008 8:00 am
Secretary of State

01-24-2008 90047 043 ****61.25

DOCUMENT # N95000004380

1. Entity Name
GROVE ESTATES NEIGHBORHOOD ASSOCIATION, INC.



Principal Place of Business
**C/O PHOENIX MANAGEMENT
 3082 JOG ROAD
 LAKE WORTH, FL 33467 US**


Mailing Address
**C/O PHOENIX MANAGEMENT
 3082 JOG ROAD
 LAKE WORTH, FL 33467 US**

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 City & State

Zip Country Zip Country



01082008 Chg-NP CR2E037 (12/06)

4. FEI Number
65-0645780 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**ROSENTHAL, DAVID
 PHOENIX MANAGEMENT
 5082 JOG ROAD
 LAKE WORTH, FL 33467**

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

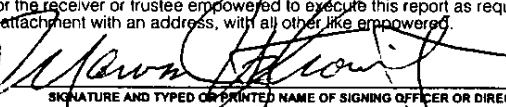
Filing Fee is \$61.25 Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE P <input type="checkbox"/> Delete	NAME ITZKOWITZ, MARVIN STREET ADDRESS 9793 LEMONWOOD COURT CITY-ST-ZIP BOYNTON BEACH, FL 33437	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VD <input type="checkbox"/> Delete	NAME WEISBERG, DAVID STREET ADDRESS 9772 LEMONWOOD DRIVE CITY-ST-ZIP BOYNTON BEACH, FL 33437	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D <input checked="" type="checkbox"/> Delete	NAME GROSFLAM, BERNARD STREET ADDRESS 9816 LEMONWOOD CT. CITY-ST-ZIP BOYNTON BEACH, FL 33437	TITLE D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME Austin, Bill STREET ADDRESS 7673 Lemonwood St. CITY-ST-ZIP Boynton Beach FL 33437
TITLE TD <input type="checkbox"/> Delete	NAME KURTZMAN, JAMES STREET ADDRESS 9872 LEMONWOOD WAY CITY-ST-ZIP BOYNTON BEACH, FL 33437	TITLE D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME Kopelowitz, Manuel STREET ADDRESS 9781 Lemonwood Ct. CITY-ST-ZIP Boynton Beach FL 33437
TITLE SD <input type="checkbox"/> Delete	NAME CEASER, OLLIE STREET ADDRESS 9796 LEMONWOOD DR. CITY-ST-ZIP BOYNTON BEACH, FL 33437	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D <input checked="" type="checkbox"/> Delete	NAME BROWN, JEFFERY STREET ADDRESS 9857 LEMONWOOD DRIVE CITY-ST-ZIP BOYNTON BEACH, FL 33437	TITLE D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME Jacobs, Sandra STREET ADDRESS 9855 Lemonwood Way CITY-ST-ZIP Boynton Beach FL 33437

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE  **DATE** 1/21/08 **DAYTIME PHONE #** 561-733-9253