

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743320

Entity Name: VILLAGE GROVE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**115 MAITLAND AVE.
ALTAMONTE SPRINGS, FL 32701**Current Mailing Address:**115 MAITLAND AVE.
ALTAMONTE SPRINGS, FL 32701 US**FEI Number:** 59-1833154**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TOP NOTCH MANAGEMENT
115 MAITLAND AVE.
ALTAMONTE SPRINGS, FL 32701 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:** MARILYN VINCE

04/18/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name BENSON, MARK
Address 115 MAITLAND AVE.
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title DIRECTOR
Name PETITT, VIRGINIA
Address 115 MAITLAND AVE.
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title DIRECTOR
Name MORRISON, JONI
Address 115 MAITLAND AVE.
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title TREASURER, PRESIDENT
Name BELK, BRYAN
Address 115 MAITLAND AVE.
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title VP
Name HUGHES, DANIEL
Address 115 MAITLAND AVE.
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title DIRECTOR
Name CRUZ, JOHNATHAN
Address 115 MAITLAND AVE.
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title DIRECTOR
Name ADAMS, CHERYL
Address 115 MAITLAND AVE.
City-State-Zip: ALTAMONTE SPRINGS FL 32701

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: BRYAN BELK**PRESIDENT**

04/18/2023

Electronic Signature of Signing Officer/Director Detail

Date