2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2015
Secretary of State
CC5829497712

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Entity Name: MAGNOLIA COURT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O GRS MANAGEMENT ASSOCIATES INC
3900 WOODLAKE BLVD SUITE 309
LAKE WORTH , FL 33463

Current Mailing Address:

C/O GRS MANAGEMENT ASSOCIATES INC
3900 WOODLAKE BLVD SUITE 309
LAKE WORTH , FL 33463 US

FEI Number: 04-3655630

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WYANT-CORTEZ & CORTEZ CHARTERED PA
840 US HIGHWAY ONE
SUITE 345
NORTH PALM BEACH, FL 33408 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: CLAIRE WYANT CORTEZ 04/27/2015

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	D	Title	P
Name	SAIN, ERIC	Name	MASRI, MARY
Address	C/O GRS MANAGEMENT ASSOCIATES INC 3900 WOODLAKE BLVD SUITE 309	Address	C/O GRS MANAGEMENT ASSOCIATES INC 3900 WOODLAKE BLVD SUITE 309
City-State-Zip:	LAKE WORTH FL 33463	City-State-Zip:	LAKE WORTH FL 33463
Title	TD	Title	SD
Name	TOM, CHARLOTTE	Name	MARCO , KATHY
Address	C/O GRS MANAGEMENT ASSOCIATES INC 3900 WOODLAKE BLVD SUITE 309	Address	C/O GRS MANAGEMENT ASSOCIATES INC 3900 WOODLAKE BLVD SUITE 309
City-State-Zip:	LAKE WORTH FL 33463	City-State-Zip:	LAKE WORTH FL 33463
Title	DIR		
Name	BENJAMIN, PAIGE ARNOLD		
Address	C/O GRS MANAGEMENT ASSOCIATES INC 3900 WOODLAKE BLVD SUITE 309		
City-State-Zip:	LAKE WORTH FL 33463		

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: MARY MASRI PD 04/27/2015

Electronic Signature of Signing Officer/Director Detail — Date