

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000007676

**Entity Name:** THOMSON VILLAGE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O GRS COMMUNITY MANAGEMENT  
3900 WOODLAKE BLVD. SUITE 309  
LAKE WORTH, FL 33463

**Current Mailing Address:**

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

**FEI Number:** 65-1158947

**Certificate of Status Desired:** No

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

LEAVY LAW, PA  
800 VILLAGE SQUARE CROSSINGS  
SUITE 216  
PALM BEACH GARDENS, FL 33410 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:** MARIA LEAVY

01/20/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name BLAKENEY, KEVIN  
Address C/O GRS COMMUNITY MANAGEMENT  
3900 WOODLAKE BLVD. SUITE 309  
City-State-Zip: LAKE WORTH FL 33463

Title TREASURER  
Name WHITAKER, REBECCA  
Address C/O GRS COMMUNITY MANAGEMENT  
3900 WOODLAKE BLVD. SUITE 309  
City-State-Zip: LAKE WORTH FL 33463

Title P  
Name LEMONS, RONALD  
Address C/O GRS COMMUNITY MANAGEMENT  
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:** RONALD LEMONS

PRESIDENT

01/20/2023

Electronic Signature of Signing Officer/Director Detail

Date