#### 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007727

Entity Name: THURSTON GROVES HOMEOWNERS ASSOCIATION, INC.

FILED
Mar 18, 2020
Secretary of State
7018085467CC

# **Current Principal Place of Business:**

24701 US HIGHWAY 19 N

SUITE 102

CLEARWATER, FL 33763

## **Current Mailing Address:**

24701 US HIGHWAY 19 N SUITE 102

CLEARWATER, FL 33763 US

FEI Number: 59-3753408 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

LOVETERE, JULIE 24701 US HIGHWAY 19 N SUITE 102

CLEARWATER, FL 33763 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: JULIE LOVETERE 03/18/2020

Electronic Signature of Registered Agent Date

#### Officer/Director Detail:

Title SD Title PD

Name PUTMAN, MARY ANNE Name JAHNKE, ROBERT

Address 24701 US HIGHWAY 19 N Address 24701 US HIGHWAY 19 N

SUITE 102 SUITE 102

City-State-Zip: CLEARWATER FL 33763 City-State-Zip: CLEARWATER FL 33763

Title TREASURER Title DIRECTOR

Name LIMA, STELLA Name DISHAROON, JOSEPH L

Address 24701 US HIGHWAY 19 N Address 24701 US HIGHWAY 19 N

SUITE 102 SUITE 102

City-State-Zip: CLEARWATER FL 33763 City-State-Zip: CLEARWATER FL 33763

Title VPD

Name GARRITY MCCLELLAN, SUSAN

Address 24701 US HIGHWAY 19 N

SUITE 102

City-State-Zip: CLEARWATER FL 33763

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.

PD

SIGNATURE: ROBERT JAHNKE

Electronic Signature of Signing Officer/Director Detail

03/18/2020