

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000008307

**Entity Name:** NORTHTON GROVE HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Apr 12, 2016**  
**Secretary of State**  
**CC3432981846**

**Current Principal Place of Business:**

5523 W CYPRESS ST  
STE 102  
TAMPA, FL 33607

**Current Mailing Address:**

P O BOX 803555  
DALLAS, TX 75380

**FEI Number: 20-0927926**

**Certificate of Status Desired: No**

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title	S	Title	P
Name	BRAVO, MATTHEW	Name	BRAVO, JENNIFER
Address	5523 W CYPRESS ST STE 102	Address	5523 W CYPRESS ST STE 102
City-State-Zip:	TAMPA FL 33607	City-State-Zip:	TAMPA FL 33607
Title	VP	Title	TREASURER
Name	PLESSINGER, COURTNEY	Name	MARTINELLI, JIM
Address	5523 W CYPRESS ST STE 102	Address	5523 W CYPRESS ST SUITE 102
City-State-Zip:	TAMPA FL 33607	City-State-Zip:	TAMPA FL 33607

*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: JENNIFER H BRAVO**

**PRESIDENT**

**04/12/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date