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.

PRESIDENT

SIGNATURE: SHELLEY S. KAERCHER Electronic Signature of Signing Officer/Director Detail

Name and Address of Current Registered Agent:

NRAI SERVICES, INC 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

Officer/Director Detail :

Title	PRESIDENT, DIRECTOR	Title	VP, DIRECTOR
Name	KAERCHER, SHELLEY S.	Name	MAXON, ESPERANZA
Address	2600 LAKE LUCIEN DRIVE, SUITE 350	Address	2600 LAKE LUCIEN DRIVE, SUITE 350
City-State-Zip:	MAITLAND FL 32779	City-State-Zip:	MAITLAND FL 32779
Title	SECRETARY, TREASURER, DIRECTOR		
Name	LUMM, DAVID		
Address	2600 LAKE LUCIEN DRIVE, SUITE 350		
City-State-Zip:	MAITLAND FL 32779		

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N1400002976

Entity Name: THORNBROOKE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2600 LAKE LUCIEN DRIVE SUITE 350 MAITLAND, FL 32779

Current Mailing Address:

2600 LAKE LUCIEN DRIVE SUITE 350 MAITLAND, FL 32779 US

FEI Number: NOT APPLICABLE

FILED Mar 05, 2017 Secretary of State CC9265578820

Date

Certificate of Status Desired: No

Date

03/05/2017