

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19028

**FILED**  
**Feb 15, 2014**  
**Secretary of State**  
**CC3459984921****Entity Name:** PLANTATION GROVE MOBILE HOME OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**4801-9TH STREET E.  
BOX 274  
BRADENTON, FL 34203**Current Mailing Address:**4801-9TH STREET E.  
BOX 274  
BRADENTON, FL 34203**FEI Number: 59-2781421****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**GOETZ, CARL H  
4703 12TH ST E BOX 207  
BRADENTON, FL 34203 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	P
Name	LALONDE, CHARLES
Address	4745 10TH. ST. EAST
City-State-Zip:	BRADENTON FL 34203

Title	S
Name	GIVLER, DOROTHY
Address	4721 10TH. ST. COURT EAST
City-State-Zip:	BRADENTON FL 34203

Title	T
Name	KRUPP, KATHLEEN
Address	4804 10TH. ST. EAST
City-State-Zip:	BRADENTON FL 34203

Title	D
Name	SPAFFORD, LINDA
Address	1013 47TH. AVE.DRIVE EAST
City-State-Zip:	BRADENTON FL 34203

Title	VP
Name	LACASCIO, LARRY
Address	1210 46TH. AVE. EAST
City-State-Zip:	BRADENTON FL 34203

Title	D
Name	WOOLUMS, GARY
Address	1043 46TH. AVE. EAST
City-State-Zip:	BRADENTON FL 34203

*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: KATHLEEN KRUPP****TREASURER****02/15/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date