

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19058

Entity Name: ASPENWOOD AT GRENELEFE CONDOMINIUM OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**C/O POLK COMMUNITY ASSOCIATION MGMT.
5340 HWY 544 EAST
HAINES CITY, FL 33844**Current Mailing Address:**C/O POLK COMMUNITY ASSOCIATION MGMT.
P.O. BOX 5195
HAINES CITY, FL 33845 US**FEI Number: 59-2912019****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SOUTH MILHAUSEN, P.A.
ATTN: MARLENE KIRIAN
1000 LEGION PLACE, SUITE 1200
ORLANDO, FL 32801 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	TD
Name	WAGNER, JOE
Address	49 ASPEN DRIVE
City-State-Zip:	HAINES CITY FL 33844

Title	PRESIDENT
Name	BOCSKOR, FRED SR.
Address	53 ASPEN DRIVE
City-State-Zip:	HAINES CITY FL 33844

Title	SECRETARY
Name	PENNEY, KRISTA
Address	84 ASPEN DRIVE
City-State-Zip:	HAINES CITY FL 33844

Title	VD
Name	BURNELL, ELLEN
Address	57 ASPEN DRIVE
City-State-Zip:	HAINES CITY FL 33844

Title	VP
Name	COOK, BRAD
Address	58 ASPEN DRIVE
City-State-Zip:	HAINES CITY FL 33844

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: KRISTA PENNEY**SECRETARY****04/05/2023**

Electronic Signature of Signing Officer/Director Detail

Date