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: DAVID CIPOLLONI

Electronic Signature of Signing Officer/Director Detail

| 2018 FLORIDA NOT FOR PROFIT | CORPORATION ANNUAL REPORT |
|-----------------------------|---------------------------|

#### DOCUMENT# N35013

Entity Name: THE GROVE AT PARKER LAKES NEIGHBORHOOD HOMEOWNERS ASSOCIATION, INC.

# Current Principal Place of Business:

C/O CORNERSTONE ASSOCIATION MANAGEMENT INC 11934 FAIRWAY LAKE DR SUITE 01 FORT MYERS, FL 33913

## **Current Mailing Address:**

C/O CORNERSTONE ASSOCIATION MANAGEMENT INC 11934 FAIRWAY LAKE DR SUITE 01 FORT MYERS, FL 33913 US

# FEI Number: 59-3026911

## Name and Address of Current Registered Agent:

NASSOIY, SHERRY CORNERSTONE ASSOCIATION MGT, INC. 11934 FAIRWAY LAKES DR. SUITE 01 FORT MYERS, FL 33913 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:

Address

Electronic Signature of Registered Agent

C/O CORNERSTONE ASSOCIATION

11934 FAIRWAY LAKE DR SUITE 01

MANAGEMENT INC

City-State-Zip: FORT MYERS FL 33913

#### **Officer/Director Detail :**

| Title           | TREASURER   | Title           | VP  |  |
|-----------------|---|-----------------|---|--|
| Name            | NORTH, PATRICIA   | Name            | BECK, ROD   |  |
| Address         | C/O CORNERSTONE ASSOCIATION<br>MANAGEMENT INC<br>11934 FAIRWAY LAKE DR SUITE 01 | Address         | C/O CORNERSTONE ASSOCIATION<br>MANAGEMENT INC<br>11934 FAIRWAY LAKE DR SUITE 01 |  |
| City-State-Zip: | FORT MYERS FL 33913   | City-State-Zip: | FORT MYERS FL 33913   |  |
| <b></b>         |   |                 |   |  |
| Title           | SECRETARY   | Title           | PRESIDENT   |  |
| Name            | BAKER, LEE  | Name            | CIPOLLONI, DAVID  |  |
| Address         | C/O CORNERSTONE ASSOCIATION<br>MANAGEMENT INC<br>11934 FAIRWAY LAKE DR SUITE 01 | Address         | C/O CORNERSTONE ASSOCIATION<br>MANAGEMENT INC<br>11934 FAIRWAY LAKE DR SUITE 01 |  |
| City-State-Zip: | FORT MYERS FL 33913   | City-State-Zip: | FORT MYERS FL 33913   |  |
| Title           | DIRECTOR  |                 |   |  |
|                 |   |                 |   |  |
| Name            | LUTTER, SUE   |                 |   |  |

### 04/14/2018 PRESIDENT

FILED Apr 14, 2018 Secretary of State CC7122894383

Certificate of Status Desired: No

Date

Date