

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35013

Entity Name: THE GROVE AT PARKER LAKES NEIGHBORHOOD
HOMEOWNERS ASSOCIATION, INC.**FILED**
Mar 07, 2015
Secretary of State
CC0688665874**Current Principal Place of Business:**C/O CORNERSTONE ASSOCIATION MANAGEMENT INC
11934 FAIRWAY LAKE DR SUITE01
FORT MYERS, FL 33913**Current Mailing Address:**C/O CORNERSTONE ASSOCIATION MANAGEMENT INC
11934 FAIRWAY LAKE DR SUITE01
FORT MYERS, FL 33913 US**FEI Number: 59-3026911****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**NASSOIY, SHERRY
CORNERSTONE ASSOCIATION MGT, INC.
11934 FAIRWAY LAKES DR. SUITE01
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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**Title TREASURER
Name NORTH, PATRICIA
Address 14971 LAKE OLIVE DRIVE
City-State-Zip: FORT MYERS FL 33919Title VP
Name BECK, ROD
Address 14621 LAKE OLIVE DR.
City-State-Zip: FORT MYERS FL 33919Title DIRECTOR
Name LUTTER, SUE
Address 14881 LAKE OLIVE DR.
City-State-Zip: FORT MYERS FL 33919Title PRESIDENT
Name REYNOLDS, GEORGE
Address 9091 SILVER PALM CT
City-State-Zip: FORT MYERS FL 33919Title SECRETARY
Name MADRZYKOWSKI, GARY
Address 9200 CLOVE CT.
City-State-Zip: FORT MYERS FL 33919

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: GEORGE REYNOLDS**PRESIDENT****03/07/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date