

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35013

Entity Name: THE GROVE AT PARKER LAKES NEIGHBORHOOD
HOMEOWNERS ASSOCIATION, INC.**FILED**
Mar 15, 2014
Secretary of State
CC2440103157**Current Principal Place of Business:**C/O CORNERSTONE ASSOCIATION MANAGEMENT INC
11940 FAIRWAY LAKE DR SUITE04
FORT MYERS, FL 33913**Current Mailing Address:**C/O CORNERSTONE ASSOCIATION MANAGEMENT INC
11940 FAIRWAY LAKE DR SUITE04
FORT MYERS, FL 33913 US**FEI Number: 59-3026911****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**NASSOY, SHERRY
CORNERSTONE ASSOCIATION MGT, INC.
11940 FAIRWAY LAKES DR. SUITE04
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 DP
Name REYNOLDS, GEORGE
Address 9091 SILVER PALM CT
City-State-Zip: FORT MYERS FL 33919Title SECRETARY
Name RAY, BARBARA
Address 9201 CLOVE CT.
City-State-Zip: FORT MYERS FL 33919Title VP
Name MADRZYKOWSKI, GARY
Address 9200 CLOVE CT.
City-State-Zip: FORT MYERS FL 33919Title DIRECTOR
Name LUTTER, SUE
Address 14881 LAKE OLIVE DR.
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****03/15/2014**

Electronic Signature of Signing Officer/Director Detail

Date