

**2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# N37665

**Entity Name:** PLANTATION GROVE WEST ASSOCIATION, INC.

**Current Principal Place of Business:**

4327 S. HWY 27 #415  
CLERMONT, FL 34711

**Current Mailing Address:**

4327 S. HWY 27 #415  
CLERMONT, FL 34711 US

**FEI Number:** 59-3042991

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

TPS ASSOCIATION MANAGEMENT SERVICES, LLC  
4327 S. HWY 27 #415  
CLERMONT, FL 34711 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:** DIANNE TREADWELL

12/01/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            TREASURER

Name           GEORGE, JOANNE

Address        PO BOX 783367

City-State-Zip: WINTER GARDEN FL 34778

Title            PRESIDENT

Name           HATZIANASTASIADIS, LAURA

Address        PO BOX 783367

City-State-Zip: WINTER GARDEN FL 34778

Title            DIRECTOR

Name           LOEWEN, RICHARD

Address        PO BOX 783367

City-State-Zip: WINTER GARDEN FL 34778

Title            SECRETARY

Name           TOROK, CHRISTINE

Address        PO BOX 783367

City-State-Zip: WINTER GARDEN FL 34778

Title            VP

Name           GERBER, JEFFREY

Address        PO BOX 783367

City-State-Zip: WINTER GARDEN FL 34778

*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:** HATZIANASTASIADIS , LAURA

PRESIDENT

12/01/2020

Electronic Signature of Signing Officer/Director Detail

Date