

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N38036

**Entity Name:** PLEASANT GROVE PROFESSIONAL CENTER OWNERS' ASSOCIATION, INC.

**FILED**  
**Apr 26, 2014**  
**Secretary of State**  
**CC0540717815**

**Current Principal Place of Business:**

C/O JEANNETTE M. HAAG  
452 PLEASANT GROVE ROAD  
INVERNESS, FL 34452

**Current Mailing Address:**

C/O JEANNETTE M. HAAG  
452 PLEASANT GROVE ROAD  
INVERNESS, FL 34452 US

**FEI Number: 59-3109615**

**Certificate of Status Desired: No**

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

HAAG, JEANNETTE M  
452 PLEASANT GROVE RD.  
INVERNESS, FL 34452 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 D  
Name WARDLOW, ROBERT  
Address 450 PLEASANT GROVE RD.  
City-State-Zip: INVERNESS FL 34452

Title D  
Name CASH, PAUL  
Address 450 PLEASANT GROVE RD.  
City-State-Zip: INVERNESS FL 34452

Title D  
Name HAAG, JEANNETTE M  
Address 452 PLEASANT GROVE RD.  
City-State-Zip: INVERNESS FL 34452

*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: ROBERT C WARDLOW, III**

**DIRECTOR**

**04/26/2014**

Electronic Signature of Signing Officer/Director Detail

Date