## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000735

Entity Name: BROOKSIDE AT INDIAN SPRINGS HOMEOWNER'S

ASSOCIATION, INC.

Jun 14, 2024 Secretary of State 5021690189CC

**FILED** 

## **Current Principal Place of Business:**

GRS COMMUNITY MANAGEMENT 3900 WOODLAKE BLVD. SUITE 309 LAKE WORTH, FL 33463

## **Current Mailing Address:**

GRS COMMUNITY MANAGEMENT 3900 WOODLAKE BLVD. SUITE 309 LAKE WORTH, FL 33463 US

FEI Number: 65-0406361 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

FLORIDA ASSOCIATION ATTORNEYS 824 W. INDIANTOWN RD. JUPITER, FL 33458 US

TREASURER

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:

Title

Date

Officer/Director Detail:

**PRESIDENT** VΡ Title Title

Electronic Signature of Registered Agent

AMBROSIO, FRANK Name Name AMROSIO, FRANK

Address GRS COMMUNITY MANAGEMENT Address DAVENPORT PROPERTY

3900 WOODLAKE BLVD. SUITE 309 MANAGEMENT 6620 LAKE WORTH RD. SUITE F

City-State-Zip: LAKE WORTH FL 33463

LAKE WORTH FL 33467 City-State-Zip:

Title **SECRETARY** Name FARBER, GERALD

WEINER SEAGRAVES, PAMELA Name Address DAVENPORT PROPERTY MGMT

6620 LAKE WORTH RD. SUITE F DAVENPORT PROPERTY MGMT Address

6620 LAKE WORTH RD. SUITE F LAKE WORTH FL 33467 City-State-Zip:

City-State-Zip: LAKE WORTH FL 33467

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.

06/14/2024 SIGNATURE: AMBROSIO, FRANK **PRESIDENT**