2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004380

Entity Name: GROVE ESTATES NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

C/O PHOENIX MANAGEMENT SERVICES, INC. 6131B LAKE WORTH RD GREENACRES, FL 33463

Current Mailing Address:

C/O PHOENIX MANAGEMENT SERVICES, INC. 6131B LAKE WORTH RD GREENACRES, FL 33463 US

FEI Number: 65-0645780

Name and Address of Current Registered Agent:

ROSENTHAL, DAVID C/O PHOENIX MANAGEMENT SERVICES, INC. 6131B LAKE WORTH RD GREENACRES, FL 33463 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

Officer/Director Detail :

Title	Р	Title	VP
Name	AUSTIN, BILL	Name	WEISBERG, DAVID
Address	7673 LEMONWOOD ST.	Address	9772 LEMONWOOD DR.
City-State-Zip:	BOYNTON BEACH FL 33437	City-State-Zip:	BOYNTON BEACH FL 33437
Title	D	Title	S
Name	CASUCCI, GIACOMO	Name	RIFF, MARLA
Address	9837 LEMONWOOD WAY	Address	9838 LEMONWOOD DR
City-State-Zip:	BOYNTON BEACH FL 33437	City-State-Zip:	BOYNTON BEACH FL 33437
Title	TREASURER	Title	DIRECTOR
Title Name	TREASURER BARBETTA, VINCENT	Title Name	DIRECTOR SCHNETZER, CHRIS
Name	BARBETTA, VINCENT	Name	SCHNETZER, CHRIS 9824 LEMONWOOD WAY
Name Address	BARBETTA, VINCENT 9805 LEMONWOOD CT.	Name Address	SCHNETZER, CHRIS 9824 LEMONWOOD WAY
Name Address City-State-Zip:	BARBETTA, VINCENT 9805 LEMONWOOD CT. BOYNTON BEACH FL 33437	Name Address	SCHNETZER, CHRIS 9824 LEMONWOOD WAY
Name Address City-State-Zip: Title	BARBETTA, VINCENT 9805 LEMONWOOD CT. BOYNTON BEACH FL 33437 DIRECTOR	Name Address	SCHNETZER, CHRIS 9824 LEMONWOOD WAY
Name Address City-State-Zip: Title Name	BARBETTA, VINCENT 9805 LEMONWOOD CT. BOYNTON BEACH FL 33437 DIRECTOR DIAMOND, ARNIE 9747 LEMONWOOD WAY	Name Address	SCHNETZER, CHRIS 9824 LEMONWOOD WAY

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.

PRESIDENT

SIGNATURE: BILL AUSTIN	
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Electronic Signature of Signing Officer/Director Detail

FILED Feb 12, 2014 Secretary of State CC5714721167

Certificate of Status Desired: No

Date