

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000171

Entity Name: LAKE GROVE PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

4970 SW LAKE GROVE CIR.
PALM CITY, FL 34490

Current Mailing Address:

P.O. BOX 2431
PALM CITY, FL 34491

FEI Number: 65-0461431

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARTWRIGHT, J. HENRY ESQ.
FOX WACKEEN, ET AL
3473 SE WILLOUGHBY BOULEVARD
STUART, FL 34995-0006 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: J. HENRY CARTWRIGHT

03/09/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name HUDOCK, JOHN
Address P.O. BOX 2431
City-State-Zip: PALM CITY FL 34491

Title DIRECTOR
Name MONASTRA, ELIZABETH
Address P.O. BOX 2431
City-State-Zip: PALM CITY FL 34491

Title PRESIDENT
Name SMITH, GREGORY
Address P.O. BOX 2431
City-State-Zip: PALM CITY FL 34491

Title VP
Name SANDERSON, STEVE
Address P.O. BOX 2431
City-State-Zip: PALM CITY FL 34491

Title TREASURER
Name MCCARTHY, SEAN
Address P.O. BOX 2431
City-State-Zip: PALM CITY FL 34491

Title SECRETARY
Name DUNN, JEANNE
Address P.O. BOX 2431
City-State-Zip: PALM CITY FL 34491

Title DIRECTOR
Name LEVULIS, LORRAINE
Address P.O. BOX 2431
City-State-Zip: PALM CITY FL 34491

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: GREGORY SMITH

PRESIDENT

03/09/2018

Electronic Signature of Signing Officer/Director Detail

Date