

2020 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 US**FEI Number:** 65-0461431**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KAYE BENDER REMBAUM, P.L.
1200 PARK CENTRAL BLVD., S
POMPANO BEACH, FL 33064-0006 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

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

Title TREASURER
Name BARTNICK, KAREN
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 UHL, JACLYN
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

03/17/2020

Electronic Signature of Signing Officer/Director Detail_____
Date