

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000005386

**Entity Name:** PALM GROVE RESIDENTS ASSOCIATION, INC.

**Current Principal Place of Business:**

530 WEST UNIVERSITY AVENUE  
GAINESVILLE, FL 32601

**Current Mailing Address:**

530 WEST UNIVERSITY AVENUE  
GAINESVILLE, FL 32601 US

**FEI Number:** 59-3530060

**Certificate of Status Desired:** No

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

GUARDIAN ASSOCIATION MANAGEMENT, LLC  
530 WEST UNIVERSITY AVENUE  
GAINESVILLE, FL 32601 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:** THOMAS EATON

02/10/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name FOLTZ, BOB E  
Address 3546 NW 25TH TERRACE  
City-State-Zip: GAINESVILLE FL 32605

Title S  
Name ROCKWELL, TIM  
Address 3212 NW 25 TERRACE  
City-State-Zip: GAINESVILLE FL 32605

Title T  
Name GOSS, MATTHEW  
Address 2543 NW 34TH PLACE  
City-State-Zip: GAINESVILLE FL 32605

Title VP  
Name VUKSON, MICHAEL  
Address 2507 NW 35TH PLACE  
City-State-Zip: GAINESVILLE FL 32605

*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:** BOB FOLTZ

**PRESIDENT**

02/10/2017

Electronic Signature of Signing Officer/Director Detail

Date