

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 13, 2008 8:00 am
Secretary of State

05-13-2008 90017 002 ****61.25

DOCUMENT # N02000003265

1. Entity Name

MANGO GROVES NEIGHBORHOOD ASSOCIATION, INC.



Principal Place of Business

MANGO GROVES
PO BOX 1341
LAKE WORTH FL 33460

Mailing Address

MANGO GROVES
PO BOX 1341
LAKE WORTH FL 33460



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E037 (10/07)

Zip

Country

Zip

Country

4. FEI Number

02-0687517

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BETTY C. RESCH, ESQ.
521 LAKE AVE, #1
LAKE WORTH FL 33460

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☐ Delete
NAME CALHOUN, MIKE
STREET ADDRESS 415 NORTH L STREET
CITY-STATE-ZIP LAKE WORTH FL 33460

TITLE V ☐ Change ☒ Addition
NAME GREG RICE
STREET ADDRESS 6388 BELVEDERE ROAD
CITY-STATE-ZIP WEST PALM BEACH, FL 33413

TITLE V ☒ Delete
NAME NORRIS, TOM
STREET ADDRESS 302 NORTH K ST
CITY-STATE-ZIP LAKE WORTH FL 33460

TITLE S ☐ Change ☒ Addition
NAME DIANE DEMPSEY
STREET ADDRESS 717 NORTH M STREET
CITY-STATE-ZIP LAKE WORTH, FL 33460

TITLE D ☐ Delete
NAME HAINES, SHERRY
STREET ADDRESS 328 NORTH K ST
CITY-STATE-ZIP LAKE WORTH FL 33460

TITLE D ☒ Change ☐ Addition
NAME TOM NORRIS
STREET ADDRESS 302 NORTH K STREET
CITY-STATE-ZIP LAKE WORTH, FL 33460

TITLE D ☐ Delete
NAME AVILEZ, ANTON
STREET ADDRESS 721 NORTH M STREET
CITY-STATE-ZIP LAKE WORTH FL 33460

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE T ☐ Delete
NAME PARR, PAT
STREET ADDRESS 506 NORTH L ST
CITY-STATE-ZIP LAKE WORTH FL 33460

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE D ☐ Delete
NAME MOONEY, DICK
STREET ADDRESS 509 NORTH L STREET
CITY-STATE-ZIP LAKE WORTH FL 33460

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Patricia Parr*

PATRICIA PARR TREAS. 4/23/08