

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2004 8:00 am
Secretary of State

02-11-2004 90038 036 ****61.25

DOCUMENT # N29761

1. Entity Name
LAWRENCE GROVE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**PROPERTY MANAGEMENT RESOURCES
SE 101 4000 S 57TH AVE
LAKE WORTH, FL 33463 US**

Mailing Address
**PROPERTY MANAGEMENT RESOURCES
SE 101 4000 S 57TH AVE
LAKE WORTH, FL 33463 US**

94014165



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01072004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
65-0099349

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**JERRY FLATOW CO PROPERTY MGMT RESOURCES
4000 S 57TH AVE SE 101
LAKE WORTH, FL 33463**

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 reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

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 PD ☐ Delete
NAME PETERFREUND, LISA
STREET ADDRESS 1338 FAIRFAX CIR EAST
CITY-ST-ZIP BOYNTON BEACH, FL 33436

TITLE TD ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☐ Delete
NAME REED, TINA
STREET ADDRESS 1353 FAIRFAX CIR WEST
CITY-ST-ZIP BOYNTON BEACH, FL 33436

TITLE ☒ Change ☐ Addition
NAME HINKLE, TINA
STREET ADDRESS 1353 FAIRFAX CIRCLE EAST
CITY-ST-ZIP

TITLE TD ☒ Delete
NAME PASQUA, DEAN
STREET ADDRESS 1305 FAIRFAX CIRCLE EAST
CITY-ST-ZIP BOYNTON BEACH, FL 33436

TITLE ☒ Change ☒ Addition
NAME Jim Chamberland
STREET ADDRESS 1335 Fairfax Cir E
CITY-ST-ZIP Boynton Bch FL 33436

TITLE VD ☐ Delete
NAME DEVITO, JOSEPH
STREET ADDRESS 1372 AUBURN CT
CITY-ST-ZIP BOYNTON BEACH, FL 33436

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME SIMON, MAXWELL
STREET ADDRESS 1350 FAIRFAE CIRCLE EAST
CITY-ST-ZIP BOYNTON BEACH, FL 33436

TITLE PD ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME MISSEY, CHRISTOPHER
STREET ADDRESS 1332 FAIRFAX CIR EAST
CITY-ST-ZIP BOYNTON BEACH, FL 33436

TITLE ☒ Change ☒ Addition
NAME JOC Automare
STREET ADDRESS 1334 Fairfax Cir East
CITY-ST-ZIP Boynton Bch FL 33436

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Lisath Peterfreund

1/12/2004

561-649-1787

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #