

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2006 8:00 am
Secretary of State

01-27-2006 90032 018 ****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
--	--

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01062006 Chg-NP CR2E037 (11/05)

4. FEI Number 65-0099349	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent JERRY FLATOW CO PROPERTY MGMT RESOURCES 4000 S 57TH AVE SE 101 LAKE WORTH, FL 33463	7. Name and Address of New Registered Agent 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, 2006	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 NAME STREET ADDRESS CITY-ST-ZIP	TD PETERFREUND, LISA 1338 FAIRFAX CIR EAST BOYNTON BEACH, FL 33436 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD AQUINO, Jim 1228 SUSSEX STREET BOYNTON BEACH, FL 33436 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HINKLE, TINA 1353 FAIRFAX CIR WEST BOYNTON BEACH, FL 33436 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD GRIBBON, JAMES 1310 FAIRFAX CIRCLE E. BOYNTON BEACH, FL 33436 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHAMBERLAND, JIM 1305 FAIRFAX CIRCLE EAST BOYNTON BEACH, FL 33436 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GOODMUTH, LINDA 1087 FAIRFAX CIRCLE W BOYNTON BEACH, FL 33436 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DEVITO, JOSEPH 1372 AUBURN CT BOYNTON BEACH, FL 33436 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEVITO, JOSEPH 1372 AUBURN CT. BOYNTON BEACH, FL 33436 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LINDAY, ILIA 1220 SUSSEX ST BOYNTON BEACH, FL 33436 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MARSHALL, BETH 1336 FAIRFAX CIRCLE E BOYNTON BEACH, FL 33436 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D D'ANGELO, PAT 1309 FAIRFAX CIR EAST BOYNTON BEACH, FL 33436 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THOMAS, TONY 1343 FAIRFAX CIRCLE E BOYNTON BEACH, FL 33436 ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: James J. Aquino **JAMES J. AQUINO** 1-12-06 561-315-9143
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

D KOLLAKI, STEVE
1388 AUBURN CT.
BOYNTON BEACH, FL 33436