## **2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

## FILED Apr 17, 2008 8:00 am Secretary of State

04-17-2008 90009 031 \*\*\*\*61.25

## DOCUMENT # N29761

LAWRENCE GROVE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business Mailing Address 大学学の大学の大学と行りかり PROPERTY MANAGEMENT RESOURCES PROPERTY MANAGEMENT RESOURCES SE 101 4000 S 57TH AVE SE 101 4000 S 57TH AVE LAKE WORTH, FL 33463 LAKE WORTH, FL 33463 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01112008 Chg-NP CR2E037 (12/06) 4. FEI Number 65-0099349 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JERRY FLATOW CO PROPERTY MGMT RESOURCES 4000 S 57TH AVE SE 101 Street Address (P.O. Box Number is Not Acceptable) LAKE WORTH, FL 33463 Zip Code FL 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) Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May 8e Trust Fund Contribution. Florida Department of State Due by May 1, 2008 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. TITLE TITLE ☐ Delete Change Addition LUCAS, CHRIS 1300 FAIRFAX CIRCLESE AGUINO, JIM NAME NAME 1228 SUSSEX ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH, FL 33436 CITY-ST-ZIP BOYNTON BEACH, FC 334 36 TITLE ☐ Delete TITLE Addition GRIBBON, JAMES NAME NAME STREET ADDRESS 1310 FAIRFAX CIRCLE E STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH, FL 33436 CITY-ST-ZIF TITLE ☐ Dotete TITLE ☐ Change Addition GOODMUTH, LINDA NAME NAME STREET ADDRESS 1087FAIRFAX CIRCLE E STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH, FL 33436 CITY-ST-ZIF TITLE Delete TITLE ☐ Change ☐ Addition DEVITO, JOSEPH NAME NAME 1372 AUBURN CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH, FL 33436 CITY-ST-ZIP ■ Addition TITLE ☐ Defete TITLE NAME MARSHALL, BETH NAME STREET ADDRESS 1336 FAIRFAX CIRCLE E STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH, FL 33436 CITY-ST-ZIP VPD ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME THOMAS, TONY NAME 1343 FAIRFAX CIRCLE E STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH, FL 33436 CITY-ST-ZIP

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 empty wered 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:

Daytime Phone I