

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29761

FILED
Jan 20, 2010
Secretary of State

Entity Name: LAWRENCE GROVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O QUALITY MANAGEMENT GROUP
9045 LA FONTANA BLVD, STE. 101
BOCA RATON, FL 33434 US

New Principal Place of Business:

Current Mailing Address:

C/O QUALITY MANAGEMENT GROUP
9045 LA FONTANA BLVD, STE. 101
BOCA RATON, FL 33434 US

New Mailing Address:

FEI Number: 65-0099349

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DICKER, KRIVOC & STOLOFF, P.A. ATTN: AT LA
1818 AUSTRALIAN AVENUE SOUTH
SUITE 400
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: AQUINO, JAMES
Address: 9045 LA FONTANA BLVD STE 101
City-St-Zip: BOCA RATON, FL 33434

Title: V
Name: DEVITO, CHRISTOPHER
Address: 9045 LA FONTANA BLVD STE 101
City-St-Zip: BOCA RATON, FL 33434

Title: T
Name: LUCAS, CHRISTOPHER
Address: 9045 LA FONTANA BLVD STE 101
City-St-Zip: BOCA RATON, FL 33434

Title: S
Name: GOODMOUTH, LYNDIA
Address: 9045 LA FONTANA BLVD STE 101
City-St-Zip: BOCA RATON, FL 33434

Title: D
Name: SARLAY, JOE
Address: 9045 LA FONTANA BLVD STE 101
City-St-Zip: BOCA RATON, FL 33434

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: JAMES AQUINO

P

01/20/2010

Electronic Signature of Signing Officer or Director

Date