## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000002503

FILED Mar 24, 2010 Secretary of State

Entity Name: GROVE ESTATES II NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

% PHOENIX MANAGEMENT C/O PHOENIX MANAGEMENT SERVICES, INC.

3082 JOG ROAD 3082 JOG ROAD

LAKE WORTH, FL 33467 US LAKE WORTH, FL 33467 US

Current Mailing Address: New Mailing Address:

% PHOENIX MANAGEMENT C/O PHOENIX MANAGEMENT SERVICES, INC.

3082 JOG ROAD 3082 JOG ROAD

LAKE WORTH, FL 33467 US LAKE WORTH, FL 33467 US

FEI Number: 65-0726673 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROSENTHAL, DAVID ROSENTHAL, DAVID

3082 JOG ROAD C/O PHOENIX MANAGEMENT SERVICES, INC.

LAKE WORTH, FL 33467 US 3082 JOG ROAD

LAKE WORTH, FL 33467 US

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: DAVID ROSENTHAL 03/24/2010

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Γitle: VPD

Name: MARGARET, DIANA
Address: 9539 HONEYBELL CIR.
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D

Name: STEINBERG, NORMAN
Address: 9515 HONEYBELL CIR.
City-St-Zip: BOYNTON BEACH, FL 33437

Title: PD

Name: HERMANN, DIANNE
Address: 9564 HONEYBELL CIR.
City-St-Zip: BOYNTON BEACH, FL 33437

Title: TD

 Name:
 PARIS, ROLAND

 Address:
 9632 HONEYBELL CIR.

 City-St-Zip:
 BOYNTON BEACH, FL 33437

Title: SD

Name: AVIGNON, JOSETTE
Address: 9616 HONEYBELL CIR.
City-St-Zip: BOYNTON BEACH, FL 33437

Title:

Name: SULZER, RICHARD
Address: 9604 HONEYBELL CIR.
City-St-Zip: BOYNTON BEACH, FL 33437

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: DIANNE HERMANN PD 03/24/2010