

**2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# 722732

**Entity Name:** SOLANO GROVE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

9252 SAN JOSE BLVD.  
JACKSONVILLE, FL 32257

**Current Mailing Address:**

9252 SAN JOSE BLVD.  
JACKSONVILLE, FL 32257 US

**FEI Number:** 59-1504490

**Certificate of Status Desired:** No

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

BROWN, CHARLES W ESQ  
CRABTREE LAW GROUP, P.A.  
8777 SAN JOSE BLVD BUILDING A STE 200  
JACKSONVILLE, FL 32257 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            TREASURER  
Name            TIBOR, JOAN  
Address        9252 SAN JOSE BLVD  
                  UNIT 1104  
City-State-Zip: JACKSONVILLE FL 32257  
  
Title            VP  
Name            GRIFFIN, FRANKLIN G  
Address        9252 SAN JOSE BLVD  
                  UNIT 2601  
City-State-Zip: JACKSONVILLE FL 32257

Title            SECRETARY  
Name            EMERSON, CARMEN M  
Address        9252 SAN JOSE BLVD.  
                  UNIT 1504  
City-State-Zip: JACKSONVILLE FL 32257  
  
Title            PRESIDENT  
Name            HANSEN, JENNIFER L  
Address        9252 SAN JOSE BLVD  
                  UNIT 404  
City-State-Zip: JACKSONVILLE FL 32257

*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:** JENNIFER L HANSEN

**PRESIDENT**

**11/08/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date