2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 15, 2004 8:00 am
Secretary of State
04-15-2004 90008 016 ***150.00

DOCUMENT # 745982

1. Entity Name

GRIFFIN ROAD CIVIC ASSOCIATION, INC.

54033635

MOORE CR2E037 (11/03)

Principal Place of Business	Mailing Address
5120 S.W. 195 TERRACE SOUTHWEST RANCHES FL 33332 US	5120 S.W. 195 TERRACE SOUTHWEST RANCHES FL 33332 US

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

4. FEI Number 59-1970194 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BREITKREUZ, STEVEN
5120 S.W. 195 TERRACE
SOUTHWEST RANCHES FL 33332

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

FILE NOW: FEE IS $61.25
Due By May 1, 2004

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	PD BREITKREUZ, STEVEN 5120 S.W. 195 TERRACE SOUTHWEST RANCHES FL 33332	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP EUSTMAN, JOHN 4801 S.W. 188 AVE. SOUTHWEST RANCHES FL 32222	☐ Delete	D	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CAYNE, CLAUDIA 4801 S.W. 186 AVE. SOUTHWEST RANCHES FL 33332	☒ Delete	SD Lesley THIELE 4841 SW 188 Ave Southwest Ranches, FL 33332	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D AVELLO, ALFREDO JR 5151 S.W. 195 TERRACE SOUTHWEST RANCHES FL 33332	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD REINIA, ELLEN 4801 S.W. 195 TERRACE SOUTHWEST RANCHES FL 33332	☐ Delete	VP D	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SUMMERLIN, MARGARET 5180 S.W. 186 AVE. SOUTHWEST RANCEHES FL 33332	☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: _____ 2/15/04 954-296-6018
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #