

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745982

FILED
Jan 15, 2006
Secretary of State

Entity Name: GRIFFIN ROAD CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

5120 S.W. 195 TERRACE
SOUTHWEST RANCHES, FL 33332 US

New Principal Place of Business:

Current Mailing Address:

5120 S.W. 195 TERRACE
SOUTHWEST RANCHES, FL 33332 US

New Mailing Address:

FEI Number: 59-1970194

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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

01/15/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BREITKREUZ, STEVEN
Address: 5120 S.W. 195 TERRACE
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: D () Delete
Name: EASTMAN, JOHN
Address: 4801 S.W. 188 AVE.
City-St-Zip: SOUTHWEST RANCHES, FL 32222

Title: SD () Delete
Name: THIELE, LESLEY
Address: 4841 SW 188 AVE.
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: VD () Delete
Name: AVELLO, ALFREDO JR
Address: 5151 S.W. 195 TERRACE
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: D () Delete
Name: REINIG, ELLEN
Address: 4801 S.W. 195 TERRACE
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: TD () Delete
Name: MAINS, DAWN
Address: 4820 SW 188 AVE.
City-St-Zip: SOUTHWEST RANCHES, FL 33332

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BREITKREUZ, STEVEN J
Address: 5120 S.W. 195 TERRACE
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: STEVEN J BREITKREUZ

PD

01/15/2006

Electronic Signature of Signing Officer or Director

Date