

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745982

FILED
Mar 21, 2009
Secretary of State

Entity Name: GRIFFIN ROAD CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

4801 S.W. 188 AVE.
SOUTHWEST RANCHES, FL 33332 US

New Principal Place of Business:

Current Mailing Address:

4801 S.W. 188 AVE.
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:

EASTMAN, JOHN
4801 S.W. 188 AVE.
SOUTHWEST RANCHES, FL 33332 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: PD () Delete
Name: EASTMAN, JOHN
Address: 4801 S.W. 188 AVE.
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: D () Delete
Name: EUBANK, MARY ELLEN
Address: 4930 S.W. 193 LANE
City-St-Zip: SOUTHWEST RANCHES, FL 33332

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

Title: TD () Delete
Name: MARGARET, SUMMERLIN
Address: 5851 SW 186 AVENUE
City-St-Zip: SOUTHWEST RANCHES, FL 33332 US

Title: SD () Delete
Name: DEBBIE, GREEN
Address: 5201 SW 199 AVENUE
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: SD () Change (X) Addition
Name: ROBERT, BUSCH
Address: 18601 SW 61 COURT
City-St-Zip: SOUTHWEST RANCHES, FL 33332

I hereby certify that the information supplied with this filing does not qualify 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: JOHN WILLIAM EASTMAN

PD

03/21/2009

Electronic Signature of Signing Officer or Director

Date