

2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90030 013 ****61.25

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1. Entity Name
CONWAY GROVES HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
C/O PENN FIRST MANAGEMENT, INC.
1813 NO. DEAN RD., STE. 103
ORLANDO, FL 32817

Mailing Address
C/O PENN FIRST MGMT INC
1813 N. DEAN RD 103
ORLANDO, FL 32817

94058088



2. Principal Place of Business

3. Mailing Address

498 Palm Springs Drive
Suite 235
Altamonte Springs, FL
32701 USA

498 Palm Springs Drive
Suite 235
Altamonte Springs, FL
32701 USA

03302004 Chg-NP CR2E037 (10/03)

City & State
Altamonte Springs, FL
Zip
32701
Country
USA

City & State
Altamonte Springs, FL
Zip
32701
Country
USA

4. FEI Number
59-3391233
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SHEELER, LARRY
C/O PENN FIRST MANAGEMENT, INC.
1813 NO. DEAN RD., STE. 103
ORLANDO, FL 32817

7. Name and Address of New Registered Agent

Name
James W Boyle
Street Address (P.O. Box Number is Not Acceptable)
498 Palm Springs Drive
Suite 235
City
Altamonte Springs FL
Zip Code
32701

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 date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
GRAY, ALLAN
4230 CRANMORE COURT
BELLE ISLE, FL 32812 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
BAUM, STEVE
4125 BELL TOWER COURT
BELLE ISLE, FL 32812 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPSPD
MOERMAN, STEVE
4244 BELL TOWER CT
ORLANDO, FL 32812 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President/Vice President ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Secretary
Dagner, Laura
4214 Belle Grove Court
Orlando, FL 32812 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Director at Large
Jane, DAKshamuni
4112 Bell Tower Court
Orlando, FL 32812 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Stephen D. Baum

4/16/04

407-649-5859