2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2009
Secretary of State

DOCUMENT# N03000009918

Entity Name: GRACE GROVE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

4568 NORTH U.S. HIGHWAY 1
VERO BEACH, FL 32967

New Principal Place of Business:

Current Mailing Address:

4568 NORTH U.S. HIGHWAY 1
VERO BEACH, FL 32967

New Mailing Address:

FEI Number: 20-0928151 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAVIS, JAMES
4568 NORTH U.S. HIGHWAY 1
VERO BEACH, FL 32967 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: P ( ) Delete
Name: SKAGGS, DUDLEY
Address: 4075 42ND SQUARE
City-St-Zip: VERO BEACH, FL 32967

Title: T ( ) Delete
Name: REAVES, SUSAN
Address: 4568 N. US HWY 1
City-St-Zip: VERO BEACH, FL 32967

Title: VP ( ) Delete
Name: MAGADAN, SANTA
Address: P.O. BOX 78094
City-St-Zip: SEBASTIAN, FL 32978

Title: S ( ) Delete
Name: POWELL, IVA
Address: 4061 42ND SQUARE
City-St-Zip: VERO BEACH, FL 32967

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: PRYOR, ORLAUNDRA
Address: 4052 42ND SQUARE
City-St-Zip: VERO BEACH, FL 32967

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

Title: VP (X) Change ( ) Addition
Name: ASHLEY, BARBARA
Address: 4047 42ND SQUARE
City-St-Zip: VERO BEACH, FL 32967

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

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: SUSAN REAVES T 01/19/2009

Electronic Signature of Signing Officer or Director — Date