

**2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# 745982

**Entity Name:** GRIFFIN ROAD CIVIC ASSOCIATION, INC.

**Current Principal Place of Business:**

5441 SW 198TH TERR  
SOUTHWEST RANCHES, FL 33332

**Current Mailing Address:**

5441 SW 198TH TERR  
SOUTHWEST RANCHES, FL 33332 US

**FEI Number:** 59-1970194

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GREEN, DEBORAH ANN  
5201 SW 199TH AVE  
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:** DEBORAH ANN GREEN

05/04/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            HARTMANN, BOB  
Address        5441 SW 198TH TERR  
City-State-Zip: SOUTHWEST RANCHES FL 33332

Title            TREASURER  
Name            MORSE, LAURIE  
Address        5780 SW 188TH AVE  
City-State-Zip: SOUTHWEST RANCHES FL 33332

Title            S  
Name            DEBBIE, GREEN .  
Address        5201 SW 199 AVENUE  
City-State-Zip: SOUTHWEST RANCHES FL 33332

Title            VP  
Name            ARONOFSKY, JILL  
Address        5781 SW 188TH AVE  
City-State-Zip: SOUTHWEST RANCHES FL 33332

Title            DIRECTOR  
Name            LASKEY, JAMES  
Address        5780 SW 188 AVENUE  
City-State-Zip: SOUTHWEST RANCHES FL 33332

Title            DIRECTOR  
Name            ARONOFSKY, IRWIN  
Address        5781 SW 188TH AVENUE  
City-State-Zip: SOUTHWEST RANCHES FL 33332

Title            DIRECTOR  
Name            EPPS, CURTISS  
Address        18600 SW 55TH STREET  
City-State-Zip: SOUTHWEST RANCHES FL 33332

Title            DIRECTOR  
Name            WITCHER, LISA A  
Address        20300 SW 48TH STREET  
City-State-Zip: SOUTHWEST RANCHES FL 33332

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*I hereby 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 all other like empowered.*

**SIGNATURE:** DEBBIE GREEN

**SECRETARY**

05/04/2015

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name MACFIE, MARY  
Address 5500 SW 195TH TERRACE  
City-State-Zip: SOUTHWEST RANCHES FL 33332

Title DIRECTOR  
Name BUTLER, WALT  
Address 18901 SW 63RD STREET  
City-State-Zip: SOUTHWEST RANCHES FL 33332

Title DIRECTOR  
Name ARLOTTA, OFELIA  
Address 19100 SW 59TH STREET  
City-State-Zip: SOUTHWEST RANCHES FL 33332

Title DIRECTOR  
Name HANLEY, MICHAEL  
Address 20400 SW 50TH PLACE  
City-State-Zip: SOUTHWEST RANCHES FL 33332

Title DIRECTOR  
Name BUTLER, DENA  
Address 18901 SW 63RD STREET  
City-State-Zip: SOUTHWEST RANCHES FL 33332