## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12195

Entity Name: GRANDE LAGOON RANCHES ASSOCIATION, INC.

FILED Feb 23, 2016 Secretary of State CC4939524750

**Current Principal Place of Business:** 

3351 NIGHTHAWK LN PENSACOLA. FL 32506

**Current Mailing Address:** 

P.O. BOX 34266

PENSACOLA, FL 32507

FEI Number: 59-0944546 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHILLER, JOSEPH 3403 NIGHTHAWK LN PENSACOLA, FL 32506 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: JOSEPH SCHILLER 02/23/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PRESIDENT Title VP

NameGILES, HENRYNameSMITH, EDWARDAddressP.O. BOX 34266AddressP.O. BOX 34266

City-State-Zip: PENSACOLA FL 32507 City-State-Zip: PENSACOLA FL 32507

TitleSECRETARY-TREASURERTitleDIRECTORNameBUCK, CATHERINENameDAVIS, CHRIS .AddressP.O. BOX 34266AddressP.O BOX 34266

City-State-Zip: PENSACOLA FL 32507 City-State-Zip: PENSACOLA FL 32507

TitleDIRECTORTitleDIRECTORNameODHAM, STEVENameRINGER, TIMAddressP.O. BOX 34266AddressP.O. BOX 34266

City-State-Zip: PENSACOLA FL 32507 City-State-Zip: PENSACOLA FL 32507

Title OUTGOING 2015 SECRETARY-

TREASURER

Name WELLS, SUZANNE Address P.O. BOX 34266

City-State-Zip: PENSACOLA FL 32507

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: SUZANNE WELLS

OUTGOING 2105 SECRETARY-TREASURER 02/23/2016

Electronic Signature of Signing Officer/Director Detail

Date