2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 21, 2006 8:00 am Secretary of State **DOCUMENT # 707497** 1. Entity Name 03-21-2006 90008 049 ****61.25 GROVE CITY CIVIC ASSOCIATION, INC. Principal Place of Business Mailing Address P.O BOX 5201 GROVE CITY STATION GROVE CITY FL 34224 **8171 DREW ST** GROVE CITY FL 34224 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 59-2130884 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Elliot Helfand BROKAW, JODY 😘 Street Address (P.O. Box Number is Not Acceptable) 8171 DREW ST **ENGLEWOOD FL 34224** 2245 Oleada Court 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. 3-7-2006 SIGNATURE L FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Delete TITLE HARRIS**Æ**RV NAME NAME 2273 BROOKWOOD DR STREET ADDRESS STREET ADDRESS **GROVE CITY FL 34224** CITY-ST-ZIP CITY-ST-ZIP Change TETLE Delete TITLE ☐ Addition Dave Dayton BECK, JAMES NAME NAME 2257 Brookwood Drive 1935 OREGON TRAIL STREET ADDRESS STREET ADDRESS GROVE CITY FL 34224 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Change TITLE ☐ Delete ☐ Addition NAME SHINSKE, AUDREY NAME STREET ADDRESS 2820 12TH STREET STREET ADDRESS CITY-ST-7IP GROVE CITY FL CITY-ST-ZIP TITLE **☒** Delete TITLE Change Addition Elliot Helfand NAME BROKAW, JODY NAME 2245 Oleada Court 8171 DREW ST STREET ADDRESS STREET ADDRESS City Fl. 34224 CITY-ST-ZIP GROVE CITY FL 34224 CITY-ST-ZIP Grove TITLE 🗷 Delete TITLE Phyllis Dayton Drive 2257 Brookwood Drive STEENROD, DICK NAME NAME STREET ADDRESS 2217 OLEADA CT STREET ADDRESS Grove City Fl 34224 **GROVE CITY FL 34224** CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition TITLE TITLE Stewart DIO4 DAYTON, DAVID NAME NAME 2257 BROOKWOOD DR STREET ADDRESS STREET ADDRESS GROVE CITY FL 34224 CITY-ST-ZIP Cirove City 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 path; 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:

FILED