2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2011
Secretary of State

DOCUMENT# 707497

Entity Name: GROVE CITY CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

2820 12TH STREET
GROVE CITY, FL 34224 US

New Principal Place of Business:

Current Mailing Address:

P.O BOX 5201
GROVE CITY STATION
GROVE CITY, FL 34224 US

New Mailing Address:

FEI Number: 59-2130884 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HELFAND, ELLIOT
2245 OLEADA COURT
GROVE CITY, FL 34224 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
Name: SHINSKE, AUDREY P MRS
Address: 2820 12TH STREET
City-St-Zip: GROVE CITY, FL 34224

Title: VP
Name: DAYTON, DAVID
Address: 2257 BROOKWOOD DR
City-St-Zip: GROVE CITY, FL 34224

Title: S
Name: DAYTON, PHYLLIS
Address: 2257 BROOKWOOD DR
City-St-Zip: GROVE CITY, FL

Title: T
Name: HELFAND, ELLIOT
Address: 2245 OLEADA COURT
City-St-Zip: GROVE CITY, FL 34224

Title: D
Name: BROKAW, JODY
Address: 8171 DREW STREET
City-St-Zip: GROVE CITY, FL 34224

Title: D
Name: STEWART, RUTH
Address: 2424 PLACIDA D104
City-St-Zip: GROVE CITY, FL 34224

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: AUDREY P. SHINSKE P 01/15/2011

Electronic Signature of Signing Officer or Director Date