

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2001 8:00 am
Secretary of State

03-26-2001 90035 005 ****61.25

0067887

DOCUMENT # 720569

1. Entity Name

GARDEN GROVE COMMUNITIES, INC.

Principal Place of Business

**119 STEVENSON RD
WINTER HAVEN FL 33884
US**

Mailing Address

**P.O. BOX 56
CYPRESS GRDNS FL 33884
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2262391

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fees Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DUNN, AL
119 STEVENSON RD
WINTER HAVEN FL 33884**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
FEE IS \$61.25**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **SD** ☒ Delete
NAME **SMTIH, ANNETTE**
STREET ADDRESS **237 LAKE NED RD.**
CITY-ST-ZIP **WINTER HAVEN, FL 00000**

TITLE **D** ☐ Delete
NAME **BRENDEMUHL, MARK**
STREET ADDRESS **237 DURRELL ROAD**
CITY-ST-ZIP **WINTER HAVEN FL 33884**

TITLE **PD** ☒ Delete
NAME **SMITH, GARY**
STREET ADDRESS **237 LAKE NED RD**
CITY-ST-ZIP **WINTER HAVEN FL**

TITLE **VD** ☒ Delete
NAME **HERRICK, JOHN**
STREET ADDRESS **425 CYPRESS COVE**
CITY-ST-ZIP **WINTER HAVEN FL 33884**

TITLE **D** ☒ Delete
NAME **CARSON, SELWYN**
STREET ADDRESS **229 LAKE NED ROAD**
CITY-ST-ZIP **WINTER HAVEN, FL 33884**

TITLE **T** ☒ Delete
NAME **BUDDE, DENNIS**
STREET ADDRESS **228 CHAUCER LANE**
CITY-ST-ZIP **WINTER HAVEN FL**

TITLE **P** ☐ Change ☐ Addition
NAME **Dunn, Al**
STREET ADDRESS **119 Stevenson Rd.**
CITY-ST-ZIP **Winter Haven, Fla. 33884**

TITLE **V** ☐ Change ☒ Addition
NAME **Henderson, Bill**
STREET ADDRESS **420 Cypress Cove**
CITY-ST-ZIP **Winter Haven, Fla. 33884**

TITLE **S** ☐ Change ☒ Addition
NAME **Fullam, Marie**
STREET ADDRESS **228 Pain Dr.**
CITY-ST-ZIP **Winter Haven, Fla. 33884**

TITLE **T** ☐ Change ☒ Addition
NAME **Allen, Donald W.**
STREET ADDRESS **153 Poe Dr SE**
CITY-ST-ZIP **Winter Haven, Fla. 33884**

TITLE **D** ☐ Change ☒ Addition
NAME **Dunn, Jo**
STREET ADDRESS **119 Stevenson**
CITY-ST-ZIP **Winter Haven, Fla. 33884**

TITLE **D** ☐ Change ☒ Addition
NAME **Niemeyer, Russell**
STREET ADDRESS **204 Lake Ned Rd.**
CITY-ST-ZIP **Winter Haven, Fla. 33884**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/26/01

Date

Daytime Phone #

CR2E037 (10/00)

attachment ^{case 146}
#720569

Garden Grove Communities

119 Stevenson Rd.

Winter Haven, Fla. 33884

Federal ID Number 59-2262391

Continuation of officers and directors

D

Addition

Wilson, Peggy

10501 Bridgewood Dr.

Winter Haven, FL 33884

D

Addition

Smith, Gary

(No longer president)

237 Lake Ned Rd.

Winter Haven, Fla. 33884