

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 720569

1. Entity Name

GARDEN GROVE COMMUNITIES, INC.

Principal Place of Business

Mailing Address

119 STEVENSON RD
WINTER HAVEN FL 33884
US

P.O. BOX 56
CYPRESS GRDNS FL 33884
US

2. Principal Place of Business

3. Mailing Address

PO Box 8068

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

GARDEN GROVE
COMMUNITIES, INC.
P.O. BOX 8068
WINTER HAVEN, FL 33884-8068

Zip

Country

Zip WINTER HAVEN, FL 33884-8068

4. FEI Number

59-2262391

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

DUNN, AL
119 STEVENSON RD
WINTER HAVEN FL 33884

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

After September 13, 2002,
min. will be \$236.25.

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 P
NAME DUNN, AL
STREET ADDRESS 119 STEVENSON RD
CITY-ST-ZIP WINTER HAVEN FL 33884

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE V
NAME HENDERSON, BILL
STREET ADDRESS 420 CYPRESS COVE
CITY-ST-ZIP WINTER HAVEN FL 33884

☒ Delete

TITLE Vice President
NAME Brendemuhl, Mark
STREET ADDRESS 237 Durrell Rd, Winter Haven, FL 33884
CITY-ST-ZIP

☐ Change ☒ Addition

TITLE S
NAME FULLAM, MARIE
STREET ADDRESS 228 PAIN DR
CITY-ST-ZIP WINTER HAVEN FL 33884

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE T
NAME ALLEN, DONALD W
STREET ADDRESS 153 POE DR SE
CITY-ST-ZIP WINTER HAVEN FL 33884

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
NAME DUNN, JO
STREET ADDRESS 119 STEVENSON
CITY-ST-ZIP WINTER HAVEN FL 33884

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
NAME NIEMEYER, RUSSELL
STREET ADDRESS 204 LAKE NED RD
CITY-ST-ZIP WINTER HAVEN FL 33884

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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: *Donald W. Allen* DONALD W. ALLEN

FILED
Jul 29, 2002 8:00 am
Secretary of State

07-29-2002 90007 040 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (4/02)