

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

**FILED**  
**Apr 20, 2006 8:00 am**  
**Secretary of State**

04-20-2006 90204 048 \*\*\*\*70.00

**DOCUMENT # 761387**

1. Entity Name

**GARDEN GROVE OAKS HOMEOWNERS' ASSOCIATION, INC.**



Principal Place of Business

C/O HAROLD THOMAS  
6038 GRAND OAK DRIVE  
WINTER HAVEN FL 33884  
US

Mailing Address

6038 GRAND OAK DRIVE  
WINTER HAVEN FL 33884  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3045898

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

1st MOORE

CR2E037 (10/05)



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WALKER, BUD**  
**6004 GRAND OAK DRIVE**  
**STE 1**  
**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. 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

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete  
NAME **BARKER, R G**  
STREET ADDRESS **6030 SOUTHERN OAKS DR**  
CITY-ST-ZIP **WINTER HAVEN FL 33884**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **PD** ☒ Delete  
NAME **MURPHY, MIKE**  
STREET ADDRESS **6411 OAK GROVE DRIVE**  
CITY-ST-ZIP **WINTER HAVEN FL 33884**

TITLE **D** ☐ Change ☒ Addition  
NAME **CLOUTIER, NANCY**  
STREET ADDRESS **6207 KNOTTY PINE DR.**  
CITY-ST-ZIP **WINTER HAVEN FL 33884**

TITLE **VD** ☐ Delete  
NAME **WHITE, KEITH**  
STREET ADDRESS **6037 GRAND OAKS DR. SE**  
CITY-ST-ZIP **WINTER HAVEN FL 33884**

TITLE **D** ☒ Change ☐ Addition  
NAME **WHITE, KEITH**  
STREET ADDRESS **6037 GRAND OAKS DR**  
CITY-ST-ZIP **WINTER HAVEN FL 33884**

TITLE **TD** ☐ Delete  
NAME **THOMAS, HAROLD**  
STREET ADDRESS **6403 OAK GROVE DR. SE**  
CITY-ST-ZIP **WINTER HAVEN FL 33884**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☒ Delete  
NAME **RAND, NORMA**  
STREET ADDRESS **6610 SCENIC POINTE DR**  
CITY-ST-ZIP **WINTER HAVEN FL 33884**

TITLE **D** ☐ Change ☒ Addition  
NAME **IRVIN, JAMES**  
STREET ADDRESS **6502 OAK HAMMOCK LN**  
CITY-ST-ZIP **WINTER HAVEN FL 33884**

TITLE **SD** ☐ Delete  
NAME **GUST, RUTH**  
STREET ADDRESS **6129 GRAND OAKS DR. SE**  
CITY-ST-ZIP **WINTER HAVEN FL 33884**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby 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 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:

*Harold L. Thomas*

4/3/06

863-324-5973

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ATTACHMENT  
40055627

|                                                                                                                              |         |     |                                                                        |                                                                                   |  |
|------------------------------------------------------------------------------------------------------------------------------|---------|-----|------------------------------------------------------------------------|-----------------------------------------------------------------------------------|--|
| <b>DOCUMENT # 761387</b>                                                                                                     |         |     |                                                                        |  |  |
| 1. Entity Name<br>GARDEN GROVE OAKS HOMEOWNERS' ASSOCIATION, INC.                                                            |         |     |                                                                        |                                                                                   |  |
| Principal Place of Business<br>C/O HAROLD THOMAS<br>6038 GRAND OAK DRIVE<br>WINTER HAVEN FL 33884<br>US                      |         |     | Mailing Address<br>6038 GRAND OAK DRIVE<br>WINTER HAVEN FL 33884<br>US |                                                                                   |  |
| 2. Principal Place of Business                                                                                               |         |     | 3. Mailing Address                                                     |                                                                                   |  |
| Suite, Apt. #, etc.                                                                                                          |         |     | Suite, Apt. #, etc.                                                    |                                                                                   |  |
| City & State                                                                                                                 |         |     | City & State                                                           |                                                                                   |  |
| Zip                                                                                                                          | Country | Zip | Country                                                                | 4. FEI Number<br>59-3045898                                                       |  |
|                                                                                                                              |         |     |                                                                        | Applied For<br>Not Applicable                                                     |  |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                    |         |     |                                                                        | \$8.75 Additional Fee Required                                                    |  |
| 6. Name and Address of Current Registered Agent<br><br>WALKER, BUD<br>6004 GRAND OAK DRIVE<br>STE 1<br>WINTER HAVEN FL 33884 |         |     | 7. Name and Address of New Registered Agent                            |                                                                                   |  |
|                                                                                                                              |         |     | Name                                                                   |                                                                                   |  |
|                                                                                                                              |         |     | Street Address (P.O. Box Number is Not Acceptable)                     |                                                                                   |  |
|                                                                                                                              |         |     | City                                                                   |                                                                                   |  |
|                                                                                                                              |         |     | FL Zip Code                                                            |                                                                                   |  |

| 10. OFFICERS AND DIRECTORS                     |                                                                                                        | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 |                                                                                                                                                      |
|------------------------------------------------|--------------------------------------------------------------------------------------------------------|-------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>MILLER, BILLY H <input type="checkbox"/> DELETE<br>6132 GRAND OAKS DR<br>WINTER HAVEN FL 33884    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | PD<br>MILLER, BILLY H <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br>6132 GRAND OAKS DR<br>WINTER HAVEN FL 33884    |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>BAKER, WILLIAM E. <input type="checkbox"/> DELETE<br>6342 GROVE POINT DR<br>WINTER HAVEN FL 33884 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | VD<br>BAKER, WILLIAM E. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br>6342 GROVE POINT DR<br>WINTER HAVEN FL 33884 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> DELETE                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | D<br>PHILLIPS, JACK <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>6110 GRAND OAKS DR<br>WINTER HAVEN FL 33884      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> DELETE                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                    |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> DELETE                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                    |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> DELETE                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                    |