

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 22, 2008 8:00 am**  
**Secretary of State**

01-22-2008 90071 009 \*\*\*\*70.00

**DOCUMENT # N00000000364**

1. Entity Name  
**GRAND OAKS ESTATES HOMEOWNERS' ASSOCIATION, INC.**



Principal Place of Business  
**116 GRAND OAKS DRIVE  
 SAINT AUGUSTINE, FL 32080**

Mailing Address  
**116 GRAND OAKS DRIVE  
 SAINT AUGUSTINE, FL 32080**

40007110



2. Principal Place of Business - No P.O. Box #  
**100 Grand Oaks Drive**

3. Mailing Address  
**100 Grand Oaks Drive**

Suite, Apt. #, etc.

01182008 Chg-NP CR2E037 (12/06)

City & State  
**Saint Augustine, FL**

City & State  
**Saint Augustine, FL**

Zip  
**32080**

Country  
**US**

4. FEI Number  
**59-3732773**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**KELLEY, DONNA M  
 116 GRAND OAKS DR.  
 ST. AUGUSTINE, FL 32080**

7. Name and Address of New Registered Agent

Name  
**Martin Mounier**

Street Address (P.O. Box Number is Not Acceptable)  
**100 Grand Oaks Drive**

City  
**Saint Augustine**

FL Zip Code  
**32080**

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: **Martin Mounier** **January 18, 2008**

(NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25  
 Due by May 1, 2008**

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
D	KELLEY, DONNA M	116 GRAND OAKS DR.	ST. AUGUSTINE, FL 32080	<input checked="" type="checkbox"/>
D	GIVENS, MIKE	101 GRAND OAKS DR.	SAINT AUGUSTINE, FL 32080	<input type="checkbox"/>
D	AVERY, RON	5054 MEDORAS AVENUE	SAINT AUGUSTINE, FL 32080	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
D	David Cameron	112 Grand Oaks Drive	Saint Augustine, FL 32080	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	Martin Mounier	100 Grand Oaks Drive	Saint Augustine, FL 32080	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: **Martin Mounier** **January 18, 2008**

**100 Grand Oaks Dr** **904 461-5572**

SIGNATURE AND TYPED OR PRINTED NAME OF FINISHING OFFICER OR DIRECTOR Date Daytime Phone #