

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 24, 2007 8:00 am
Secretary of State

04-24-2007 90011 043 ****61.25

DOCUMENT # N02000003202

1. Entity Name
THE GRIFFIN PARK RESIDENT ASSOCIATION
INCORPORATED



Principal Place of Business

520 CALLAHAN DRIVE
ORLANDO, FL 32805

Mailing Address

520 CALLAHAN DRIVE
ORLANDO, FL 32805

40079082



04022007 No Chg-NP

CR2E037 (4/06)

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4. FEI Number
NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BIGGHAM, EVELINA
520 CALLAHAN DRIVE
ORLANDO, FL 32805

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IN THIS SPACE**

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

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME BIGGHAM, EVELINA
STREET ADDRESS 801 AVONDALE #1
CITY-ST-ZIP ORLANDO, FL 32805

TITLE VPD
NAME HAYDEN, ADELLA
STREET ADDRESS 801 AVONDALE #9
CITY-ST-ZIP ORLANDO, FL 32805

TITLE TD
NAME ~~MCGILL, RUBIE~~
STREET ADDRESS 745 AVONDALE AVENUE
CITY-ST-ZIP ORLANDO, FL 32805 *off*

TITLE TD
NAME DAVIS, CECILIA
STREET ADDRESS 744 DUNBAR COURT
CITY-ST-ZIP ORLANDO, FL 32805

TITLE D
NAME ~~NASH, VICKI~~
STREET ADDRESS 520 CALLAHAN DRIVE
CITY-ST-ZIP ORLANDO, FL 32805 *off*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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:

Evelina Biggham
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

04-03-07 407 843-2636
Date Daytime Phone #