2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE

9/10/2003-90052-046-\$61.25-\$61.25 ISION OF CORPORATION DOCUMENT # N02000003202 03 OCT 21 PM 2: 34 THE GRIFFIN PARK RESIDENT ASSOCIATION INCORPORAT ED Principal Place of Business Mailing Address 520 CALLAHAN DRIVE 520 CALLAHAN DRIVE ORLANDO FL 32805 ORLANDO FL 32805 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State FEI Number Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BIGGHAM, EVELINA Street Address (P.O. Box Number is Not Acceptable) **520 CALLAHAN DRIVE** ORLANDO FL 32805 City 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 famillar with, and accept the obligations of registered agent. SIGNATURE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to_ \$5.00 May Be Trust Fund Contribution. After September 10, 2003, min will be \$236.25 Added to Fees -Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. (¥ (£) DTLE ☐ Change Addition ☐ Delete TITLE BIGGHAM, EVELINA NAME NAME STREET ADDRESS 801 AVONDALE #1 STREET ADDRESS **CR2E037** CITY-ST-ZIP ORLANDO FL 32805 CITY-ST-7IP VPD ☐ Delete ☐ Change ☐ Addition TITLE HAYDEN, ADELLA NAME NAME 801 AVONDALE #9 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32805 CITY-ST-ZIP TD ----TITE F ☐ Change ☐ Addition Delete TITLE MGCILL, RUBIE NAME ... NAME 745 AVONDALE AVENUE STREET ADDRESS STREET ADDRESS ORLANDO FL 32805 CITY-ST-71P CITY-ST-7IP TOLE Delate TITLE ☐ Chance ☐ Addition DAVIS, CECELIA NAME NAME 744 DUNBAR COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32805 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NASH, VICKI NAME NAME STREET ADDRESS 520 CALLAHAN DRIVE STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32805 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY- ST-712 1 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 logal 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