

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90353 015 ****61.25

DOCUMENT # N02000005586 1. Entity Name THE ART AND PHYLLIS GRINDLE FOUNDATION, INC.			
Principal Place of Business 5341 MAXON TERRACE SANFORD, FL 32771		Mailing Address 5341 MAXON TERRACE SANFORD, FL 32771	
2. Principal Place of Business - No P.O. Box # 1147 Barnacle Ter		3. Mailing Address 1147 Barnacle Ter	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State The Villages FL		City & State The Villages FL	
Zip 32162		Zip 32162	
Country Sumter		Country Sumter	
4. FEI Number 51-0416857		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GRINDLE, ARTHUR E 223 TRAFFORD AVE. ORANGE CITY, FL 32763		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1147 Barnacle Terrace City The Villages FL Zip Code 32162	
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: Arthur E. Grindle 4-28-08 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, 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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSRD GRINDLE, ARTHUR E 223 TRAFFORD AVE. ORANGE CITY, FL 32763	☐ Delete	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRINDLE, ARTHUR E JR. 9951 SKYLARK LANE GROVELAND, FL 34736	☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMSON, KATHRYN G 511 SOUTH CRETE COURT PUNTA GORDA, FL 33950	☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHIOLDI, GALE GRINDLE P.O. BOX 737 TANGERINE, FL 32777	☐ Delete	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LANSING, CHARLIE 160 HATTAWAY DR ALTAMONTE SPRINGS, FL 32701	☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRINDLE, ELIZABETH A 5341 MAXON TERRACE SANFORD, FL 32771	☐ Delete	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Executive Director 589 Sherwood Street The Villages FL 32162	☐ Change ☐ Addition	☒ Change ☐ Addition
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: Arthur E. Grindle 4-28-08 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 352-753-4086 Daytime Phone #	