

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009537

FILED  
Apr 19, 2010  
Secretary of State

**Entity Name:** GROVELAND ESTATES COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

575 S WICKHAM ROAD SUITE E  
WEST MELBOURNE, FL 32904

**New Principal Place of Business:**

330 N BABCOCK ST  
SUITE 103  
MELBOURNE, FL 32935

**Current Mailing Address:**

575 S WICKHAM ROAD SUITE E  
WEST MELBOURNE, FL 32904

**New Mailing Address:**

330 N BABCOCK ST  
SUITE 103  
MELBOURNE, FL 32935

FEI Number: 20-2159153

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CLARK, COY A  
575 S WICKHAM ROAD SUITE E  
WEST MELBOURNE, FL 32904 US

**Name and Address of New Registered Agent:**

CLARK, COY A  
330 N BABCOCK ST, STE 103  
MELBOURNE, FL 32935 US

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.

SIGNATURE:

04/19/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: CLARK, COY A  
Address: 330 N BABCOCK ST, STE 103  
City-St-Zip: MELBOURNE, FL 32935

Title: TD  
Name: CLARK, HAILEY  
Address: 330 N BABCOCK ST, STE 103  
City-St-Zip: MELBOURNE, FL 32935

Title: DS  
Name: MAGUIRE, MICHAEL E  
Address: 330 N BABCOCK ST, STE 103  
City-St-Zip: MELBOURNE, FL 32935

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: COY A CLARK

DP

04/19/2010

Electronic Signature of Signing Officer or Director

Date