

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2008 8:00 am
Secretary of State

03-17-2008 90007 037 ****61.25

DOCUMENT # N06000002459					
1. Entity Name OAK GROVE TOWN HOMES CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 608 SOUTH 8TH STREET FERNANDINA BEACH, FL 32034			Mailing Address 608 SOUTH 8TH STREET FERNANDINA BEACH, FL 32034		
2. Principal Place of Business - No P.O. Box # 1932 Oak Dr Suite, Apt. #, etc.		3. Mailing Address 1932 Oak Dr Suite, Apt. #, etc.			
City & State Fernandina Beach, FL		City & State Fernandina Beach, FL		4. FEI Number NOT APPLICABLE	
Zip 32034		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GRIFFIN, PHILIP 608 SOUTH 8TH STREET FERNANDINA BEACH, FL 32034			7. Name and Address of New Registered Agent Name: David Mercereau Street Address (P.O. Box Number is Not Acceptable): 1932 Oak Dr City: Fernandina Beach, FL Zip Code: 32034		
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		David Mercereau - President		3/13/08	
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. <input type="checkbox"/> \$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 PD	NAME GRIFFIN, PHILIP	<input type="checkbox"/> Delete	TITLE P	NAME David Mercereau	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS P.O. BOX 16718	CITY-ST-ZIP FERNANDINA BEACH, FL 32035		STREET ADDRESS 1932 Oak Dr	CITY-ST-ZIP Fernandina Beach, FL 32034	
TITLE VD	NAME GARRETT, CHARLES	<input type="checkbox"/> Delete	TITLE V/D	NAME Julio Herrera	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS P.O. BOX 207	CITY-ST-ZIP FERNANDINA BEACH, FL 32035		STREET ADDRESS 1920 Oak Dr	CITY-ST-ZIP Fernandina Beach, FL 32034	
TITLE TD	NAME GRIFFIN, JANET	<input type="checkbox"/> Delete	TITLE T/D	NAME Ashley Mercereau	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS P.O. BOX 16718	CITY-ST-ZIP FERNANDINA BEACH, FL 32035		STREET ADDRESS 1932 Oak Dr	CITY-ST-ZIP Fernandina Beach, FL 32034	
TITLE SD	NAME GARRETT, CATHERINE	<input type="checkbox"/> Delete	TITLE S	NAME Alison Monroe	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS P.O. BOX 207	CITY-ST-ZIP FERNANDINA BEACH, FL 32035		STREET ADDRESS 1934 Oak Dr	CITY-ST-ZIP Fernandina Beach, FL 32034	
TITLE 	NAME 	<input type="checkbox"/> Delete	TITLE D	NAME Theresa Griffin	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 	CITY-ST-ZIP 		STREET ADDRESS 17916 40 Ave E	CITY-ST-ZIP Tacoma, WA 98446	
TITLE 	NAME 	<input type="checkbox"/> Delete	TITLE D	NAME Allen Davis	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 	CITY-ST-ZIP 		STREET ADDRESS 1900 Oak Dr	CITY-ST-ZIP Fernandina Beach, FL 32034	
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:		David Mercereau - President		3/13/08	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone # (904) 548-0014	

ATTACHMENT

40046438

#N06000002459

11. Additions/Changes to Officers and Directors in 10

D

Jimmy Smith

1902 Oak Dr

Fernandina Beach, FL 32034

D

Bonnie Calhoun

1892 Oak Dr

Fernandina Beach, FL 32034

D

Terry Salmon

1890 Oak Dr

Fernandina Beach, FL 32034

D

Jeanne Monroe

417 Georgia Ave

Fernandina Beach, FL 32034