## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000010964

FILED Apr 22, 2008 Secretary of State

Entity Name: PATTERSON GROVES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

107 N LINE DR 1180 SPRING CENTER SOUTH BLVD. APOPKA, FL 32703 US

SUITE 340

ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:** New Mailing Address:

1180 SPRING CENTER SOUTH BLVD. 107 N LINE DR APOPKA, FL 32703 US

SUITE 340

MAISE, CHARLES

ALTAMONTE SPRINGS, FL 32714

FEI Number: 20-5752450 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SUTHERLAND, THERESA D 107 N LINE DR

1180 SPRING CENTER SOUTH BLVD. APOPKA, FL 32703 SUITE 340 US

ALTAMONTE SPRINGS, FL 32714 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: CHARLES MAISE 04/22/2008

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete

MAISE, CHARLES Name: Name: Address: 1180 SPRING CENTER SOUTH BLVD. SUITE 340 Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: CHARLES MAISE PD 04/22/2008