2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 23, 2008 8:00 am
Secretary of State
04-15-2008 90013 036 ****70.00

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01142008 Chg-NP CR2E037 (12/06)

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1. Entity Name
GRAND OAKS ON LAKE DAMON SUBDIVISION HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2520 SAND MINE RD DAVENPORT, FL 33897	2520 SAND MINE RD DAVENPORT, FL 33897

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc. Attn: Kathy McDaniel
City & State	City & State Windermere, Fl
Zip / Country	Zip 34786-0725 / Country USA

4. FEI Number — ☐ Applied For ☑ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WYNTER, TRACY M 1556 SIXTH STREET SE WINTER HAVEN, FL 33880	Name: Floyd, Thomas C Street Address (P.O. Box Number is Not Acceptable): 2520 Sand Mine Road City: Davenport FL Zip Code: 33897

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: Thomas C. Floyd
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	D FLOYD, THOMAS C 2520 SAND MINE RD DAVENPORT, FL 33897	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MORRIS, KATHARINE B 2520 SAND MINE RD DAVENPORT, FL 33897	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Labbe, Eric 2520 Sand Mine Road Davenport, Fl 33897	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GRAUER, BENJAMIN 2520 SAND MINE RD DAVENPORT, FL 33897	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ 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: Thomas C. Floyd 2/14/08 (863) 420-6699
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #