FILED May 27, 2008 8:00 am Secretary of State 05-01-2008 90280 001 ***367.50

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2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N0700000612 1. Entity Name BISCAYNE GROVE OWNERS ASSOCIATION, INC.								
Principal Place of Business 2955 HARTLEY ROAD SUITE 108 2955 HARTLEY ROAD SUITE 108 1ACKSONVILLE, FL 32257 1ACKSONVILLE, FL 32257				•	660122	1 1 100 000 1100 1100 1000 1000 1000		
2. Principal Place of Business - No P.O. Box V 3. Mailing Address								
Suite, Apt. #, etc. S		Suite, Apt. #, etc.	uite, Apt. #, etc.		04102008 C	hg-NP CR2E	(037 (12/06)	
City & State		City & State			4. FEI Number 32-02	34146		oplied For ot Applicable
Zip	Country	Zip	Country		5. Certificate of S		\$8.75 Add	ditional
	6. Name and Address of Current Regi	stered Agent	Nai	me	7. Name and Add	tress of New Registere	d Agent	
MATOVINA, GREGORY E 2955 HARTLEY ROAD SUITE 108				Street Address (P.O. Box Number is Not Acceptable)				
JACKSONVILLE, FL 32257				Onder Accided to the Index is not Acceptable.				
			City	у			Zip Cod	e
8. The above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. It am familiar with, and accept								
the obligations of registered agent.								
SIGNATURE								
Filing Fee is \$61.25 9. Election Campaign Financing Due by May 1, 2008 Trust Fund Contribution.						Make che Florida Dep	ck payable to artment of S	o Late
10.	OFFICERS AND DIRECT		11.		ADDITIONS/CHANG	ES TO OFFICERS AND		
TITLE NAME	DP MATOVINA, GREGORY E	☐ Deletz	TITLE NAME	-			Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP	2955 HARTLEY ROAD SUITE 108 JACKSONVILLE, FL 32257		STREET ADDR	1				,
TITLE	DVPT	☐ Detete	TITLE				Change	☐ Addition
NAME STREET ADDRESS	BORSTEIN, DONALD K 2955 HARTLEY ROAD SUITE 108		STREET ADDR	RESS				ļ
CITY-ST-ZIP	JACKSONVILLE, FL 32257	- Day	CITY-S1-ZIP	<u>`</u>			Change	Addition
TITLE NAME	HUDSON, SHARON	☐ Celeta	TITLE NAME				C. comits	
STREET ADDRESS CITY-ST-ZIP	2955 HARTLEY ROAD SUITE 108 JACKSONVILLE, FL 32257		STREET ADDR					
TITLE		☐ Delete	1m£	_			Change	☐ Addition
NAME STREET ADDRESS			NAME STREET ADDR	PESS				
CITY-ST-ZIP			CITY-ST-ZIP	<u> </u>			Chance	Addition
TITLE NAME		Detere	TITLE NAME				☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP			STREET ADDR					
TITLE		Delete	TITLE		<u> </u>		☐ Change	Addition
NAME STREET ADDRESS			NAME STREET ADOI	RESS				
CITY-ST-ZIP			CITY-ST-ZIP	<u> </u>				
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: Shawn London Shacon Hubson 4/11/08 9042920778								