

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Dec 03, 2008
Secretary of State

DOCUMENT# N07000002982

Entity Name: THE GARDENS AT RIVER GROVE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**882 JACKSON AVE
WINTER PARK, FL 32789**New Principal Place of Business:****Current Mailing Address:**882 JACKSON AVE
WINTER PARK, FL 32789**New Mailing Address:****FEI Number:****FEI Number Applied For (X)****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**JORDAN, BRETT M
882 JACKSON AVE
WINTER PARK, FL 32789 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: PD () Delete
Name: BLACKWELL, BARRY
Address: 2293 WEST EAU GALLIE BLVD
City-St-Zip: MELBOURNE, FL 32935Title: VD () Delete
Name: ASHY, MARY
Address: 2293 WEST EAU GALLIE BLVD
City-St-Zip: MELBOURNE, FL 32935Title: D () Delete
Name: HALKOVIC, KRISTY
Address: 2293 WEST EAU GALLIE BLVD
City-St-Zip: MELBOURNE, FL 32935**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PD (X) Change () Addition
Name: ASHY, MARY
Address: 1801 PENN STREET SUITE 1A
City-St-Zip: MELBOURNE, FL 32901Title: VD (X) Change () Addition
Name: REIDEL, DOUG
Address: 1801 PENN STREET SUITE 1A
City-St-Zip: MELBOURNE, FL 32901Title: D (X) Change () Addition
Name: FRANZ, TOM
Address: 1801 PENN STREET SUITE 1A
City-St-Zip: MELBOURNE, FL 32901

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: MARY ASHY

PD

12/03/2008

Electronic Signature of Signing Officer or Director

Date