

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11452

FILED
Mar 03, 2012
Secretary of State

Entity Name: SWITZERLAND/GROVE BLUFF ASSOCIATION, INC.

Current Principal Place of Business:

JULIE GILLESPIE
2045 GROVE BLUFF ROAD
ST JOHNS, FL 322599299 US

New Principal Place of Business:

Current Mailing Address:

JULIE GILLESPIE
2045 GROVE BLUFF ROAD
ST JOHNS, FL 322599299 US

New Mailing Address:

FEI Number: 20-4021323

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GILLESPIE, JULIE
1942 GROVE BLUFF ROAD
ST JOHNS, FL 322599299 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: P
Name: SMITH, MARK
Address: 843 GROVE BLUFF CIRCLE N
City-St-Zip: ST JOHNS, FL 32259

Title: VP
Name: SHAUGHNESSY, TOM
Address: 1934 GROVE BLUFF CIR W
City-St-Zip: ST JOHNS, FL 32259

Title: S
Name: FITZGERALD, MYRNA
Address: 1954 GROVE BLUFF CIRCLE W
City-St-Zip: ST JOHNS, FL 32259

Title: T
Name: GILLESPIE, JULIE
Address: 2045 GROVE BLUFF ROAD
City-St-Zip: ST JOHNS, FL 322599299

I hereby 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 all other like empowered.

SIGNATURE: JULIE A GILLESPIE

TR

03/03/2012

Electronic Signature of Signing Officer or Director

Date