

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14610

FILED  
Jan 13, 2009  
Secretary of State

**Entity Name:** ROBERTS BAY ESTATES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

615 ROBERTS BAY DR  
NOKOMIS, FL 34275 US

**New Principal Place of Business:**

**Current Mailing Address:**

615 ROBERTS BAY DR  
NOKOMIS, FL 34275 US

**New Mailing Address:**

**FEI Number:** 22-1764687

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRIGSBY, JAMES  
615 ROBERTS BAY DR  
NOKOMIS, FL 34275 US

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

GRIGSBY, JAMES A PD  
615 ROBERTS BAY DR  
NOKOMIS, FL 34275 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: JAMES A. GRIGSBY

01/13/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GRIGSBY, JAMES A  
Address: 615 ROBERTS BAY DR  
City-St-Zip: NOKOMIS, FL 34275

Title: STD ( ) Delete  
Name: GRIGSBY, SHARON  
Address: 615 ROBERTS BAY DR  
City-St-Zip: NOKOMIS, FL 34275

Title: STD ( ) Delete  
Name: GRIGSBY, SCOTT  
Address: 116 VAN DYCK DR  
City-St-Zip: NOKOMIS, FL 34275

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: GRIGSBY, JAMES A PD  
Address: 615 ROBERTS BAY DR  
City-St-Zip: NOKOMIS, FL 34275

Title: STD (X) Change ( ) Addition  
Name: GRIGSBY, SHARON V STD  
Address: 615 ROBERTS BAY DR  
City-St-Zip: NOKOMIS, FL 34275

Title: STD (X) Change ( ) Addition  
Name: GRIGSBY, SCOTT M STD  
Address: 116 VAN DYCK DR  
City-St-Zip: NOKOMIS, FL 34275

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: JAMES A. GRIGSBY

PD

01/13/2009

Electronic Signature of Signing Officer or Director

Date