2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008 8:00 am
Secretary of State
05-01-2008 90205 004 ****61.25

DOCUMENT # N21108

1. Entity Name
GROGANS BLUFF ASSOCIATION, INC.

Principal Place of Business	Mailing Address
P.O BOX 350762 STE 4 JACKSONVILLE, FL 32235-0762 US	P.O BOX 350762 STE 4 JACKSONVILLE, FL 32235-0762 US

04242008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc. Delete 'STE 4'
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2880301 ☐ 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
HODSDON, BENTLEY D 967 WILDERLAND DRIVE JACKSONVILLE, FL 32225	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 Bentley D. Hodsdon BENTLEY D. HODSDON 4-26-2008
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	PD HODSDON, BENTLEY D 967 WILDERLAND DRIVE JACKSONVILLE, FL 32225	☐ Delete	D JACK ZINKAN 996 WILDERLAND DRIVE JACKSONVILLE FL 32225	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD DARLINGTON, ROBERT 981 CELEBRANT DRIVE JACKSONVILLE, FL 32225	☒ Delete	V/D SHERRY LOVELACE 12652 MISTY MOUNTAIN DRIVE E. JACKSONVILLE FL 32225	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SHIFFERT, CAROL 12629 HOBBIT LANE JACKSONVILLE, FL 32225	☐ Delete	ARCP / D JEFF KRESS 1043 CELEBRANT DRIVE JACKSONVILLE FL 32225	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ARCP DANEK, GUIDO 1061 CELEBRANT DRIVE JACKSONVILLE, FL 32225	☒ Delete	D FREDERICK BERLEY 924 ARKENSTONE DRIVE JACKSONVILLE FL 32225	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BELINGON, LANI 959 WILDERLAND DRIVE JACKSONVILLE, FL 32225	☒ Delete	D VEDA GERRINGER 923 ARKENSTONE DRIVE JACKSONVILLE FL 32225	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ 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: Carol Shiffert Carol Shiffert 4-15-2008 904-220-0131
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #