FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

GRANDVIEW GROVE PROPERTY OWNERS ASSOCIATION, INC

•			•				
Principal Place	of Business	Mailing Address	Mailing Address			BIG DIRIK BIDIK SIBAF DIRIK SI	
11255 GRANDVIEW DR. DADE CITY FL 33525 US		11255 CRANDVIEW DR. DADE CITY FL 33525 US					
US		00			3. Date incorporated or Qualified 07/08/1987	3a. Date of Last Re 04/19/199	
2. Principal Pla	ace of Business	2a. Mailing Address	a. Mailing Address		4. FEI Number	Apr	olied For
21		26			59-2963333		Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27		5. Certificate of Status Desired		
City & State	l	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	
Zip	Country	Zip Country		Trust Fund Contribution L. Added to Fees 8. This corporation has liability for intangible tax under s. 199.032,			
24	25	29	30		Florida Statutes Yes X No		
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Reg	istered Agent	****
			81	Name			
MCCLAII	N, JOE A.		82	Street Ac	Idress (P.O. Box Number is Not Acceptab	(a)	
402 E. CHURCH AVENUE							
DADE CITY FL 33525			83		·		
			64	City	·	FL 85 Zip C	ode
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.							
SIGNATURE _							<u></u>
	Signature, typed or printed name of registered ager			ent signature re	quired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	C INI 10
12.	PD OFFICERS AND		13. 1.1 TITLE	Т	PD	Change	Addition
NAME	FON WADEN	The December	1.2 NAME		ROBIN FUTCH	LES CIRCINGO	L_J /Adulton
STREET ADDRESS	2020 DEDDY CT	ete		T ADDRESS	11255 GRANDUIEW D	r.	
CITY-ST-ZIP	Mane City Fi	•	1.4 CITY-	1		3525	
TITLE	PD FON, KAREN 36830-PERRY CT DADE CITY FL STD NENSEY, TASNEEM 11345-GRANDVIEW DR DADE CITY FL VD	DELETE	2.1 TITLE	31-211	VP	Change	Addition
NAME	NENSEY, TASNEEM	1 John	2.2 NAME		WALL KHAN		
STREET ADDRESS	11345 GRANDVIEW DR	reled	2.3 STREE	T ADORESS	11310 GRANDUIEN D	e.	
CITY+ST-ZIP	BADE CITY FL		2.4 CITY-	ST-ZIP		3525	
TITLE	VD	DELETE	3.1 TITLE		SO, TO	Change	Addition
NAME	ANDERSON JAN	•	3.2 NAME	l	WARREN CROOKS	•	
STREET ADDRESS	P O BOX 2177		3.3 STREE	T ADDRESS	11321 GRAPPVIEW	DR.	
CITY-ST-ZIP	DADE CITY FL		3.4. CITY	ST-ZIP	DADE CITY, FL	33525	
TITLE		☐ DELETE	4 1 TITLE		· , , , , , , , , , , , , , , , , , , ,	☐ Change	Addition
NAME			4. 2 NAM				
STREET ADDRESS			4.3 STREE	T ADDRESS			
CITY - ST - ZIP			4.4 CHY-	ST-ZIP	· · · · · · · · · · · · · · · · · · ·		
TITLE		☐ DELETE	5.1 TITLE			∐ Change	Addition
NAME			5.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP		T 1 NEW COA	5.4 CITY			T Observ	Addies:
TITLE		☐ DELETE	6.1 YITLE			Change	Addition
NAME			6.2 NAME	1			ļ
STREET ADDRESS				T ADDRESS			
City-St-ZiP	or cartify that the information supplies	Lwith this filing does not avail	6.4 CITY-		ted in Section 119 07/3V/i) Elocide Section	e I further certify that (the
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 borporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.							

SIGNATURE:

FILED

Feb 17 1997 8:00am

Secretary of State