## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## Apr 20, 2005 08:00 AM Secretary of State DOCUMENT # N2150Q. 1. Entity Name GRANDVIEW GROVE PROPERTY OWNERS ASSOCIATION, INC. Principal Place of Business\_ Mailing Address 11301 GRANDVIEW DR 11301 GRANDVIEW DR DADE CITY, FL 33525 DADE CITY, FL 33525 US 02272005 No Chg-NP CR2E037 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2963333 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MCCLAIN, JOE A. DO NOT WRITE 402 E. CHURCH AVENUE DADE CITY, FL 33525 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if sopticable. (NOTE, Registered Agent signature required when reinstalling) DATE \$5.00 May Be 9. Election Campaign Financing Filing Fee is \$61.25 Trust Fund Contribution. Added to Fees Due by May 1, 2005 10. OFFICERS AND DIRECTORS TITLE NAME DILLON, DAN U00000317909 04/20/05-80037-018 61.25 STREET ADDRESS 36815 PERRY COURT CITY -ST - ZIP DADE CITY, FL 33525 TITLE BLACKSTONE, HARRY NAME STREET ADDRESS 11334 GRANDVIEW DRIVE City-St-ZiP DADE CITY, FL 33525 TITLE DODD, RICHARD NAME STREET ADDRESS 11301 GRANDVIEW DRIVE DO NOT WRITE CITY-ST-ZIP DADE CITY, FL 33525 TITLE IN THIS SPACE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I 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 report or supplemental report is true and securate 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 671, 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

TITLE NAME STREET ADDRESS

SIGNATURE AND TYPING OR PHINTED NAME OF SIGNING OFFICER OR DIVISORO

15/15 3525283469

**FILED**