


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2006 08:00 AM
Secretary of State

DOCUMENT # N21500
 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 US **DADE CITY, FL 33525 US**

DO NOT WRITE IN THIS SPACE



03172008 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-2963333	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent
MCCLAIN, JOE A.
402 E. CHURCH AVENUE
DADE CITY, FL 33525

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9. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

UN00001475367
 04/05/06-80012-020 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DILLON, DAN 36815 PERRY COURT DADE CITY, FL 33525
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BLACKSTONE, HARRY 11334 GRANDVIEW DRIVE DADE CITY, FL 33525
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD DODD, RICHARD 11301 GRANDVIEW DRIVE DADE CITY, FL 33525
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 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: RICHARD DODD [Signature] 3/17/06 8139971355
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #