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Apr 25 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N25281 (9)

1. Corporation Name

GROVE LAKE ESTATES PROPERTY OWNERS' ASSOCIATION, INC.

Principal Place of Business

Mailing Address

RT. 2, BOX 1204 N
CRESCENT CITY FL 32112-6655

RT. 2, BOX 1204 N
CRESCENT CITY FL 32112-9655



3. Date Incorporated or Qualified
03/08/1988

3a. Date of Last Report
03/21/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

g. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ASHWELL, CHUCK
1948 UNIVERSITY BLVD SOUTH
JACKSONVILLE FL 32216

81

Name

Rose L. Yettevich

82

Street Address (P.O. Box Number is Not Acceptable)

RT 2 Box 1223

83

84

City

CRESCENT CITY

FL

85

Zip Code

32112

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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Rose L. Yettevich* T *Rose L. Yettevich*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4-17-97

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE *PO* ☒ DELETE

NAME *ASHWELL, CHUCK*
STREET ADDRESS *1948 UNIVERSITY BLVD SOUTH*
CITY-ST-ZIP *JACKSONVILLE FL 32211*

TITLE *VPD* ☐ DELETE

NAME *BARNETT, JOHN M*
STREET ADDRESS *R R 2 BOX 1204M*
CITY-ST-ZIP *CRESCENT CITY FL*

TITLE *SD* ☒ DELETE

NAME *ASHWELL, ANN*
STREET ADDRESS *1948 UNIVERSITY BLVD SOUTH*
CITY-ST-ZIP *JACKSONVILLE FL 32211*

TITLE *T* ☐ DELETE

NAME *YETTEVICH, ROSE*
STREET ADDRESS *R R 2 BOX 1223*
CITY-ST-ZIP *CRESCENT CITY FL 32112*

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

PD *MUN CAULEY* ☒ Change ☐ Addition

RT 2 BOX 1204-R
CRESCENT CITY, FL 32112

VPD ☐ Change ☐ Addition

JOHN M BARNETT
RT 2 BOX 1204M
CRESCENT CITY, FL 32112

SD ☒ Change ☐ Addition

SONDRA JACKSON
RT 2 BOX 1205M
CRESCENT CITY, FL 32112

T ☐ Change ☐ Addition

ROSE L YETTEVICH
RT 2 BOX 1223
CRESCENT CITY, FL 32112

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)