2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26940

City-St-Zip:

LAND O LAKES, FL 34639

FILED Mar 07, 2006 Secretary of State

Entity Name: GRAND OAKS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: C/O VANGUARD MANAGEMENT 9300 N 16 STREET TAMPA, FL 33612 **New Mailing Address: Current Mailing Address:** C/O VANGUARD MANAGEMENT 9300 N 16 STREET TAMPA, FL 33612 US FEI Number: 23-2466230 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WINFIELD, JANET 9300 N 16 ST TAMPA, FL 33612 US 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. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: VPD () Delete (X) Change () Addition KOPEC, KATHY KOPEC, KATHY Name: Name: 260 22 LOBLOLLY LANE Address: 260 22 LOBLOLLY LANE Address: City-St-Zip: LAND O LAKES, FL 34639 City-St-Zip: LAND O LAKES, FL 34639 Title: PD Title: (X) Change () Addition () Delete Name: HAYFORD, JOHN Name: BUCK, RICHARD Address: 4720 BALSAM DR Address: 26012 LOBLOLLY LANE City-St-Zip: LAND O LAKES, FL 34639 City-St-Zip: LAND O' LAKES, FL 34639 Title: () Delete Title: () Change () Addition MACALUSO, RICHARD Name: Name: 4847 BASSWOOD STREET Address: Address: City-St-Zip: LAND O LAKES, FL 34639 City-St-Zip: Title: DS () Delete Title: () Change () Addition Name: CLARKE, JAMES Name: Address: 26054 SAWGRASS Address: City-St-Zip: LAND O LAKES, FL 34639 City-St-Zip: Title: () Delete Title: () Change () Addition MEIER, MARION Name: Name: 4735 WILLOW DR. Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: JANET WINFIELD AGEN 03/07/2006