

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30881

FILED  
Feb 01, 2009  
Secretary of State

**Entity Name:** GRANDE OAKS FARM HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

GRANDE OAKS HOMEOWNER ASSOCIATION INC  
P.O. BOX 467  
GONZALES, FL 32560 US

**New Principal Place of Business:**

GRANDE OAKS HOMEOWNER ASSOCIATION INC  
TATE ROAD  
GONZALES, FL 32560 US

**Current Mailing Address:**

GRANDE OAKS HOMEOWNERS ASSOCIATION INC  
P.O. BOX 467  
GONZALEZ, FL 32560 US

**New Mailing Address:**

**FEI Number:** 59-3163518      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BOOTH, CATHY  
922 BRANDERMILL DR  
CANTONMENT, FL 32533 US

**Name and Address of New Registered Agent:**

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:**

Title: P ( ) Delete  
Name: TUCKER, MIKE  
Address: 910 BRANDERMILL DR  
City-St-Zip: CANTONMENT, FL 32533

Title: V ( ) Delete  
Name: TUCKER, MIKE  
Address: 910 BRANDERMILL DR  
City-St-Zip: CANTONMENT, FL 32533

Title: ST ( ) Delete  
Name: BOOTH, CATHY  
Address: 922 BRANDERMILL DR  
City-St-Zip: CANTONMENT, FL 32533

Title: VP ( ) Delete  
Name: WALTRIP, PHIL  
Address: 907 BRANDERMILL DR  
City-St-Zip: CANTONMENT, FL 32533

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: WALTRIP, PHIL  
Address: 907 BRANDERMILL DR  
City-St-Zip: CANTONMENT, FL 32533

Title: V (X) Change ( ) Addition  
Name: ELLIOT, TAMMY  
Address: 918 BRANDERMILL DR  
City-St-Zip: CANTONMENT, FL 32533

Title: ST (X) Change ( ) Addition  
Name: PARRISH, PRENTIS E  
Address: 921 BRANDERMILL DR  
City-St-Zip: CANTONMENT, FL 32533

Title: VP (X) Change ( ) Addition  
Name: ELLIOT, TAMMY  
Address: 918 BRANDERMILL DR  
City-St-Zip: CANTONMENT, FL 32533

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: PRENTIS E PARRISH

ST

02/01/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date