

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45570

FILED
Jul 08, 2008
Secretary of State

Entity Name: GROVE HOUSE OF JACKSONVILLE, INC.

Current Principal Place of Business:

126 WEST ADAMS STREET
502
JACKSONVILLE, FL 32202 US

New Principal Place of Business:

Current Mailing Address:

126 WEST ADAMS STREET
502
JACKSONVILLE, FL 32202 US

New Mailing Address:

FEI Number: 59-3087085 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KOEGLER, STEVEN C.
10151 DEERWOOD PARK BLVD
BLDG 100 SUITE 200
JAX, FL 32256 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: PTD () Delete
Name: JACOBS, ROBERT
Address: 126 WEST ADAMS STREET, SUITE 502
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: VD () Delete
Name: MOORE, PAUL
Address: 126 WEST ADAMS STREET, SUITE 502
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: SD () Delete
Name: SCHWING, CHRISTINA
Address: 126 WEST ADAMS STREET, SUITE 502
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: M () Delete
Name: NAZWORTH, SHANNON
Address: 126 WEST ADAMS STREET, SUITE 502
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: FULLWOOD, REGGIE
Address: 126 WEST ADAMS STREET, SUITE 502
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: MATOVINA, GREG
Address: 126 WEST ADAMS STREET, SUITE 502
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: M () Change (X) Addition
Name: NAZWORTH, SHANNON
Address: 126 WEST ADAMS ST, SUITE 502
City-St-Zip: JACKSONVILLE, FL 32202 US

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: SHANNON NAZWORTH

M

07/08/2008

Electronic Signature of Signing Officer or Director

Date