

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000197

FILED
Apr 29, 2011
Secretary of State

Entity Name: THE GROVES RESIDENT'S ASSOCIATION, INC.

Current Principal Place of Business:

2480 OLD GROVES RD
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

C/O COMPASS GROUP
3701 NORTH TAMIAMI TRAIL
NAPLES, FL 34103 US

New Mailing Address:

FEI Number: 65-0406478 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

JOHN C. GOEDE, P.A.
9915 TAMIAMI TRAIL NORTH
NAPLES, FL 34119 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
Name: SEIFERT, MARY
Address: 2426 ORCHID BAY DR. #203
City-St-Zip: NAPLES, FL 34109

Title: T
Name: GARRETT, BARBARA
Address: 7454 JACARANDA DRIVE #R201
City-St-Zip: NAPLES, FL 34109

Title: VP
Name: SCHARF, RICHARD
Address: 2456 ORCHID BAY DRIVE #I-201
City-St-Zip: NAPLES, FL 34109

Title: S
Name: WEINTHALER, RICHARD
Address: 2565 OLD GROVES DRIVE 204
City-St-Zip: NAPLES, FL 34109

Title: VP
Name: ANDERSON, JOHN
Address: 7528 OLEANDER GATE DRIVE NB101
City-St-Zip: NAPLES, FL 34109

I hereby 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 all other like empowered.

SIGNATURE: MARK HUMPHREY

CFO

04/29/2011

Electronic Signature of Signing Officer or Director

Date