

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000986

FILED  
Apr 28, 2010  
Secretary of State

**Entity Name:** THE OLD NICHOLS GROVE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

190 OLD NICHOLS CIRCLE  
AUBURNDALE, FL 33823

**New Principal Place of Business:**

**Current Mailing Address:**

190 OLD NICHOLS CIRCLE  
AUBURNDALE, FL 33823

**New Mailing Address:**

**FEI Number:** 59-3250031

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AVERY, TRAVIS  
190 OLD NICHOLS CIRCLE  
AUBURNDALE, FL 33823 US

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

AVERY, TRAVIS A AVERY T  
190 OLD NICHOLS CIRCLE  
AUBURNDALE, FL 33823 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: AVERY TRAVIS

04/28/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: MARSH, PAUL  
Address: 117 OLD NICHOLS CIR  
City-St-Zip: AUBURNDALE, FL 33823

Title: VP  
Name: DENTON, JOHN  
Address: 154 OLD NICHOLS CIR  
City-St-Zip: AUBURNDALE, FL 33823

Title: TRES  
Name: AVERY, TRAVIS  
Address: 190 OLD NICHOLS CIRCLE  
City-St-Zip: AUBURNDALE, FL 33823

Title: SEC.  
Name: WADDINGHAM, T.J.  
Address: 102 OLD NICHOLS CIR  
City-St-Zip: AUBURNDALE, FL 33823

Title: MEM.  
Name: MURRAY, JIM  
Address: 110 OLD NICHOLS CIR  
City-St-Zip: AUBURNDALE, FL 33823

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: AVERY TRAVIS

TRES

04/28/2010

Electronic Signature of Signing Officer or Director

Date