

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Apr 15, 2012**  
**Secretary of State**

DOCUMENT# N93000003708

**Entity Name:** GRENELEFE COUNTRY HOME OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**2 ROBYN LANE  
HAINES CITY, FL 33844**New Principal Place of Business:**2 NOTTINGHAM WAY  
HAINES CITY, FL 33844**Current Mailing Address:**PO BOX 5196  
HAINES CITY, FL 338455196 US**New Mailing Address:****FEI Number:** 65-0434561**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MEANS, RICHARD T  
2 ROBYN LANE  
HAINES CITY, FL 33844 US**Name and Address of New Registered Agent:**JORDAN, BRANCH  
2 NOTTINGHAM WAY  
HAINES CITY, FL 33844 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: BRANCH JORDAN

04/15/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DPT  
Name: MEANS, RICHARD T  
Address: 2 ROBYN LANE  
City-St-Zip: HAINES CITY, FL 33844 US

Title: DS  
Name: BRABINER, TONY  
Address: 54 NOTTINGHAM WAY  
City-St-Zip: HAINES CITY, FL 33844 US

Title: DV  
Name: JORDAN, BRANCH  
Address: 2 NOTTINGHAM WAY  
City-St-Zip: HAINES CITY, FL 33844 US

Title: D  
Name: LEKSON, LINDA  
Address: 110 CANTERBURY DRIVE  
City-St-Zip: HAINES CITY, FL 33844 US

Title: D  
Name: LEBER, JERRY  
Address: 108 CANTERBURY DRIVE  
City-St-Zip: HAINES CITY, FL 33844 US

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: RICHARD T. MEANS

PRES

04/15/2012

Electronic Signature of Signing Officer or Director

Date