2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9300004042

1. Entity Name

GREATER GROVES HOMEOWNERS ASSOCIATION, INC.

FILED Jan 09, 2001 8:00 am Secretary of State 01-09-2001 90004 005 ****61.25

Principal Place of Business C/O POST OFFICE BOX 3873 LONGWOOD FL 32791		Mailing Address C/O POST OFFICE BOX 3873 LONGWOOD FL 32791					
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2. Principal Place of Business		3. Mailing Address) 15501101 519 19190 WAL DOWN DEAN EASH BENN DOWN DENN DERN DERN DERN DERN DERN DERN DER		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State)	City & State		4. FEI Numb	er 59-3199776		plied For t Applicable
Zip	Country	Zip	Country	5. Certificate	of Status Desired	\$8.75 Addi	itional
	· ·	attored Agent			Address of New Register	Fee Required	
	6. Name and Address of Current Re	egistered Agent	Name		Addition Or How Hogiste		
			Street A	ddress (P.O. Box Numb	per is Not Acceptable)		
BECKETT	, william a Th Eola Drive						
) FL 32801					Zip Code	
			City			FL Zip Code	<u></u> _
SIGNATURE .	Signature, typed or printed name of registered agent an	d title if applicable. (NO	TE: Registered Agent signa	ture required when reinstating)	D.	ATE	
	FILE NOW: FEE IS \$61.25	9. Election Campaig Trust Fund Contri		\$5.00 May Be Added to Fees		eck Payable to nent of State	
10.		Trust Fund Contri		Added to Fees		nemt of State	10
10.	FEE IS \$61.25 OFFICERS AND DIRE	Trust Fund Contri	11.	Added to Fees	Departm	nent of State	10
TITLE	OFFICERS AND DIRECT OFFICE	Trust Fund Contri	11. TITLE NAME STREET ADDRESS	Added to Fees	Departm	nemt of State	10
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ing does not quality for the exemption stated in Section 1997 (2014). The first fam an officer or director not accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director to execute this populars required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if indicated on this report or supplemental report is true of the corporation or the receiver or trustee empowers changed, or on an attachment with an aardines, with

SIGNATURE:

407-869-0300