

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2008 8:00 am
Secretary of State

03-17-2008 90017 009 ****61.25

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1. Entity Name
GRASSY OAKS RESIDENTS ASSOCIATION, INC.



Principal Place of Business
181 CENTER RD
VENICE, FL 34285

Mailing Address
181 CENTER RD
VENICE, FL 34285

40046918



01072008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
65-0533139

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ARGUS MANAGEMENT OF VENICE, INC.
181 CENTER RD
VENICE, FL 34285

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME FAHEY, JAMES ☐ Delete
STREET ADDRESS 705 GRASSY OAKS DR
CITY-ST-ZIP VENICE, FL 34293

TITLE TD
NAME KOCH, LOIS ☒ Delete
STREET ADDRESS 729 POND LILY WY
CITY-ST-ZIP VENICE, FL 34293

TITLE VDP
NAME COMSTOCK, ROBERT ☐ Delete
STREET ADDRESS GRASSY OAKS DRIVE
CITY-ST-ZIP VENICE, FL 34293

TITLE SD
NAME FLEMING, PAUL ☐ Delete
STREET ADDRESS GRASSY OAKS DR
CITY-ST-ZIP VENICE, FL 34293

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME TD FLEMING PAUL
STREET ADDRESS GRASSY OAKS DR
CITY-ST-ZIP VENICE, FL 34293

TITLE ☐ Change ☒ Addition
NAME SD FLEMING PAUL SALLEY CHARLES
STREET ADDRESS GRASSY OAKS DR
CITY-ST-ZIP VENICE FL 34293

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Paul Fleming

3/7/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #