## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **Secretary of State** DOCUMENT # N97000005550 01-22-2008 90078 005 \*\*\*\*61.25 COUNTRYGROVE HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 2789 COUNTRY WAY 2789 COUNTRY WAY CLEARWATER, FL 33763 CLEARWATER, FL 33763 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01152008 Chg-NP CR2E037 (12/06) 4. FEI Number 59-3499764 City & State City & State Applied For Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JOHNSON, DANIEL F CPA Street Address (P.O. Box Number is Not Acceptable) 31940 U.S. HWY. 19 NORTH PALM HARBOR, FL 34684 City 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. SIGNATUR Registered Agent signature required when reinstating) 9. Election Campaign Financing Filing Fee is \$61.25 **\$5.00** May Be Make check payable to Trust Fund Contribution Florida Department of State Due by May 1, 2008 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. PD/T TITLE Delete TITLE MCKINNEY, THOMAS NAME NAME 2789 COUNTRY WAY STREET ADDRESS STREET ADDRESS CITY-ST-7IP CLEARWATER, FL 33763 CITY-ST-ZIP Delete TITLE TITLE Change Addition MISKLSWIC, STEVE NAME NAME 2789 COUNTRY WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CLEARWATER, FL 33763 CITY-ST-7IP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME YENSAN, DON NAME 2787 COUNTRY WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CLEARWATER, FL 33763 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition HAYNES' JOANN NAME NAME STREET ADDRESS 2298 EVANS RD STREET ADDRESS CITY-ST-ZIP CLEARWATER, FL 33763 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition SKOGLUND, GERMAINE NAME NAME STREET ADDRESS 2770 COUNTRY WAY STREET ADDRESS CLEARWATER, FL 33763 CITY-ST-ZIP CITY-ST-ZIP Delete TATLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET-ADDRESS CITY-ST-ZIP CITY-ST-7IP

12. I hereby certify that the information supplied with this filling 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

with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attacl

SIGNATURE: 4

FILED

Jan 22, 2008 8:00 am