

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005550

FILED
Jan 26, 2009
Secretary of State

Entity Name: COUNTRYGROVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2789 COUNTRY WAY
CLEARWATER, FL 33763 US

New Principal Place of Business:

Current Mailing Address:

2789 COUNTRY WAY
CLEARWATER, FL 33763 US

New Mailing Address:

FEI Number: 59-3499764

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, DANIEL F CPA
31940 U.S. HWY. 19 NORTH
PALM HARBOR, FL 34684 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD/T () Delete
Name: MCKINNEY, THOMAS
Address: 2789 COUNTRY WAY
City-St-Zip: CLEARWATER, FL 33763

Title: VPD () Delete
Name: MISKLSWIC, STEVE
Address: 2789 COUNTRY WAY
City-St-Zip: CLEARWATER, FL 33763

Title: D () Delete
Name: YENSAN, DON
Address: 2787 COUNTRY WAY
City-St-Zip: CLEARWATER, FL 33763

Title: D () Delete
Name: HAYNES, JOANN
Address: 2298 EVANS RD
City-St-Zip: CLEARWATER, FL 33763

Title: D () Delete
Name: SKOGLUND, GERMAINE
Address: 2770 COUNTRY WAY
City-St-Zip: CLEARWATER, FL 33763

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: THOMAS MCKINNEY

PRES

01/26/2009

Electronic Signature of Signing Officer or Director

Date