

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

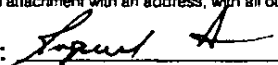
3 **FILED**
Apr 10, 2008 8:00 am
Secretary of State

03-20-2008 90028 040 ****61.25

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01042008 Chg-NP CR2E037 (12/06)

DOCUMENT # N98000003522			
1. Entity Name JUNE GROVES HOMEOWNERS' ASSOCIATION, INC.			
Principal Place of Business 11606 NW 19 DRIVE CORAL SPRINGS, FL 33071		Mailing Address POST OFFICE BOX 770850 CORAL SPRINGS, FL 33077	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-2051142		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
BROCK PROPERTY MANAGEMENT, INC. 11606 NW 19 DRIVE CORAL SPRINGS, FL 33071		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 _____ (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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STEVENS, ROBERT 13193 SW 16TH STREET DAVIE, FL 33325 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Jamie Blomquist 13102 SW 19 St. Davie, FL 33325 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST TONYAN, PETER 13190 SW 16 ST. DAVIE, FL 33325 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Raquel Fontana 1660 SW 131 Terrace Davie, FL 33325 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SUEZ, JAIMIE 13132 SW 19TH STREET DAVIE, FL 33325 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Chris Cottone 1842 SW 132 Way Davie, FL 33325 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ADZODL, DAVE 1603 SW 132ND WAY DAVIE, FL 33325 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Rawl Marciano 1662 SW 132 Way Davie, FL 33325 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Scott Fleming 13191 SW 19 St. Davie, FL 33325 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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: 		Date _____ Daytime Phone # _____	