

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N26940

**FILED**  
**Mar 04, 2015**  
**Secretary of State**  
**CC8735101638**

**Entity Name:** GRAND OAKS ASSOCIATION, INC.

**Current Principal Place of Business:**

4705 BASSWOOD ST  
LAND O LAKES , FL 34639

**Current Mailing Address:**

4705 BASSWOOD ST  
LAND O LAKES, FL 34639 US

**FEI Number: 59-3504179**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

ROBINSON, JOE  
26116 CORKWOOD COURT  
LAND O LAKES, FL 34639 US

*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: JOE ROBINSON**

**03/04/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name THOMPSON, BILL  
Address 4728 BASSWOOD ST  
City-State-Zip: LAND O LAKES FL 34639

Title D  
Name SHACKETT, GREG  
Address 4845 WILLOW DRIVE  
City-State-Zip: LAND O LAKES FL 34639

Title D  
Name ROBINSON, JOE  
Address 26116 CORKWOOD COURT  
City-State-Zip: LAND O LAKES FL 34639

Title D  
Name JESSE, ROGER  
Address 26046 LOBLOLLY LANE  
City-State-Zip: LAND O LAKES FL 34639

Title D  
Name COVEY, TROY  
Address 4705 BASSWOOD STREET  
City-State-Zip: LAND O LAKES FL 34639

*I hereby 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 all other like empowered.*

**SIGNATURE: JOE ROBINSON**

**TREASURE**

**03/04/2015**

Electronic Signature of Signing Officer/Director Detail

Date