# 2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED**
**Mar 08, 2005**
**Secretary of State**

DOCUMENT# 743099

**Entity Name:** COLONNADES MEMBERS INC.

**Current Principal Place of Business:**

1140 BAYSHORE DR
FT PIERCE, FL 34949

**New Principal Place of Business:**

**Current Mailing Address:**

1140 BAYSHORE DR
FT PIERCE, FL 34949

**New Mailing Address:**

**FEI Number: 59-1831924** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

CORNETT, JANE L ESQ
CORNETT, GOOGE & ASSOCIATES P.A.
401 E. OSCEOLA STREET
STUART, FL 34994 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 ( ) Delete
Name: MITCHELL, BILL
Address: 1181 CARLTON CT.
City-St-Zip: FORT PIERCE, FL 34949

Title: 1VP ( ) Delete
Name: GRABIAK, THEODORE
Address: 1223 BAYSHORE DR
City-St-Zip: FORT PIERCE, FL 34949

Title: 2VP ( ) Delete
Name: GREGOIRE, NEIL
Address: 1153 BAYSHORE DRIVE
City-St-Zip: FORT PIERCE, FL 34949

Title: SD ( ) Delete
Name: KRAFT, BEVERLY
Address: 1223 BAYSHORE DR.
City-St-Zip: FORT PIERCE, FL 34949

Title: TD ( ) Delete
Name: WRATHER, FRED
Address: 1172 COMMODORE CT., #206
City-St-Zip: FORT PIERCE, FL 34949

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: 2VP (X) Change ( ) Addition
Name: GRIMISER, GLORIA
Address: 1177 BAYSHORE DRIVE
City-St-Zip: FORT PIERCE, FL 34949

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 for the exemption stated in Section 119.07(3)(i), 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: FRED WRATHER T 03/08/2005

Electronic Signature of Signing Officer or Director — Date