

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 90050 011 \*\*\*\*61.25

DOCUMENT # 752268

1. Entity Name

THE GRANDVIEW CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

741 S COLLIER BLVD
MARCO ISLAND FL 34145

P.O. BOX 39
MARCO FL 34146

807540



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2152410

Applied For

Not Applicable

Zip

Country

Zip

Country

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

WILL, JEFFREY
SAFE HARBOR MANAGEMENT
233 N COLLIER BLVD
MARCO ISLAND FL 34145

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. [ ]

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE SD [ ] Delete
NAME MEADOWS, JOHN
STREET ADDRESS 5 DRAPER ST
CITY-ST-ZIP NATICK MA 01760

TITLE [ ] Change [ ] Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PD [x] Delete
NAME VANDENBURGH, GEORGE
STREET ADDRESS 1001 BURLINGTON BEACH RD
CITY-ST-ZIP VALPARISO IN 45383

TITLE D [ ] Change [x] Addition
NAME Durfee, James
STREET ADDRESS 77 Wentworth Ave.
CITY-ST-ZIP Lowell, MA 01852

TITLE TD [ ] Delete
NAME SULLIVAN, EDWARD
STREET ADDRESS 741 S COLLIER #511
CITY-ST-ZIP MARCO FL 34145

TITLE [ ] Change [ ] Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DVP [ ] Delete
NAME STASIO, JOSEPH
STREET ADDRESS 15 LINDEN ST
CITY-ST-ZIP WINTHROP MA 02152

TITLE P [x] Change [ ] Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D [ ] Delete
NAME HOLLENBECK, MARVIN
STREET ADDRESS 741 S COLLIER BLVD, #312
CITY-ST-ZIP MARCO ISLAND FL 34145

TITLE VP [x] Change [ ] Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE [ ] Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE [ ] Change [ ] Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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: EDWARD SULLIVAN

EDWARD SULLIVAN

4/27/01 (44)394-1101

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)