2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 08, 2002 8:00 am Secretary of State DOCUMENT # **752268** 1. Entity Name THE GRANDVIEW CONDOMINIUM ASSOCIATION, INC. 05-08-2002 90119 007 ****61.25 Principal Place of Business Mailing Address 741 S COLLIER BLVD P.O. BOX 39 MARCO ISLAND FL 34145 MARCO FL 34146 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 59-2152410 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) WILL, JEFFREY SAFE HARBOR MANAGEMENT 233 N COLLIER BLVD City Zip Code MARCO ISLAND FL 34145 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 DATE Signature, typed or printed name of registered agent and title if applicable Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. Delete (9/01)SD Change ☐ Addition TITLE UIS, STEWART W. MEADOWS, JOHN NAME NAME S. Collier Blud E037 STREET ADDRESS 5 DRAPER ST STREET ADDRESS Marco Isl Fl. 34145 CITY-ST-ZIP CITY-ST-ZIP NATICK MA 01760 Addition ☐ Delete TITLE ☐ Change TITLE DURFEE, JAMES NAME 77 WENTWORTH AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LOWELL MA 01852 CITY-ST-ZIP TD ☐ Change ☐ Addition ☐ Delete TITLE TITLE SULLIVAN: EDWARD NAME -NAME 741 S COLLIER #511 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MARCO FL 34145 CITY-ST-ZiP B 5D. ☐ Change TITLE Addition TITLE ☐ Delete STASIO, JOSEPH NAME NAME 15 LINDEN ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP WINTHROP MA 02152 TP.P. Change Addition ☐ Delete TITLE HOLLENBECK, MARVIN NAME NAME 741 S COLLIER BLVD. #312 STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP MARCO ISLAND FL 34145 ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

SIGNATURE: