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Apr 04 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morfitt
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N00291 (7)
1. Corporation Name
GRANT STATION HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business: 2007 WINSLOW DR ORLANDO FL 32812
Mailing Address: 4524 CURRY FORD RD #228 ORLANDO FL 32812-2799

3. Date Incorporated or Qualified: 12/12/1983
3a. Date of Last Report: 08/22/1996
4. FEI Number: 59-1513448
Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 Suite, Apt #, etc.: 22 City & State: 23 Zip: 24 Country: 25
2a. Mailing Address: 26 Suite, Apt #, etc.: 27 City & State: 28 Zip: 29 Country: 30

9. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	LESTAGE, SHANNON	
STREET ADDRESS	2007 PLAINFIELD DR	
CITY-ST-ZIP	ORLANDO FL 32812	
TITLE	DS	<input type="checkbox"/> DELETE
NAME	HAMILTON, GERALD	
STREET ADDRESS	5415 ANDOVER DR.	
CITY-ST-ZIP	ORLANDO FL 32812	
TITLE	DVP	<input type="checkbox"/> DELETE
NAME	WENDT, DITMAR	
STREET ADDRESS	2003 PLAINFIELD DR.	
CITY-ST-ZIP	ORLANDO FL 32812	
TITLE	DT	<input checked="" type="checkbox"/> DELETE
NAME	MAGLIULA, CINDY	
STREET ADDRESS	2108 WINSLOW DR.	
CITY-ST-ZIP	ORLANDO FL 32812	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	SCHMIDT KATHY	
1.3 STREET ADDRESS	2204 FAXTON CT	
1.4 CITY-ST-ZIP	ORLANDO, FL 32812	
2.1 TITLE	DT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	HAMILTON GERALD	
2.3 STREET ADDRESS	5415 ANDOVER DR	
2.4 CITY-ST-ZIP	ORLANDO, FL 32812	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *S. Hamilton* GERALD HAMILTON 3/27/97 407/281-4598
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0017248

CR2E037 (9/96)