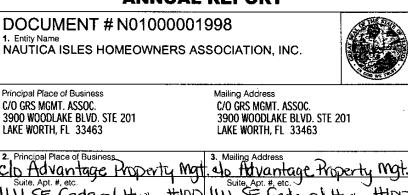
FILED Mar 23, 2006 8:00 am Secretary of State 03-23-2006 90010 003 ****61.25

ANNUAL REPORT						
DOCUMENT # N01000001998						



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Principal Place of Business C/O GRS MGMT. ASSOC. 3900 WOODLAKE BLVD. STE 201 LAKE WORTH, FL 33463 Mailing Address C/O GRS MGMT. ASSOC. 3900 WOODLAKE BLVD. STE 201 LAKE WORTH, FL 33463		TE 201	- - -	BIN 1800 PAIST NEID 1700 1800 1800 AT URIO		
clo Adv	lantage Property Matt. a	Mailing Address	Property Mgt.			
Suite, Apt.	Federal Huy #100 11	Suite, Apt. #, etc.	How HOD	03012006 Chg-NP	CR2E037 (11/05)	
Sity & Stat	t, FI	Stuart, F	, , , , , , , , , , , , , , , , , , , 	4. FEI Number 65-1089758	Applied For Not Applicable	
315	74 USA	349774	Country	5. Certificate of Status Desired	See Required	
	6. Name and Address of Current Regi	stered Agent	Name	7. Name and Address of New	Registered Agent	
BROUGH, CHADROW & LEVINE, P.A. 1900 N COMMERCE PKWY				set Address (P.O. Box Number is Not Acceptable)		
WESTON,	FL 33326					
			City		FL Zip Code	
	named entity submits this statement for the tions of registered agent.	purpose of changing its rec	gistered office or registe	ered agent, or both, in the State of I	Florida. I am familiar with, and accept	
lite obligat	ions or registered agent.					
SIGNATURE						
	-Filling Fee is \$61,25	9. Election Campa	pion Financina	* F 00	Make check payable to	
	Due by May 1, 2006	Trust Fund Con			orida Department of State	
10.	OFFICERS AND DIRECT	ORS	11.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 10	
TITLE NAME	LOPERFIDO, ROBERT	☐ Delete	TITLE PD	1	Change 🔲 Addition	
STREET ADDRESS	5098 BRIGHT GALAXY LN		STREET ADDRESS			
CITY-ST-ZIP	GREENACRES, FL 33463		CITY-ST-ZIP			
TITLE NAME	PDD SCHORR, MATTHEW A	Delete	TITLE Kod	GERCAKUER V 180 NAUTIC LAK	Change Addition	
STREET ADDRESS	5043 NAUTICAL LAKE CIR		NAME STREET ADDRESS 50	80 NAUTIC KAK	ecir.	
CITY-ST-ZIP	GREENACARES, FL 33463			ECUDIERES, FL. 33		
TITLE	D	Delete	THE TRE	45	☐ Change ☐ Addition	
NAME	SINCLAIR, DOUGLAS	•	NAME FR	ANKADENNE	ako Pip.	
STREET ADDRESS CITY-ST-ZÍP	5025 NAUTICAL LAKE CIR GREENACRES, FL 33463		STREET ADDRESS	LENACKES The	3843	
TITLE	SD	Delete	TITLE SOM		☐ Change ☐ Addition	
NAME	SLOBODOW, MICHAEL		NAME M/	chelle D. PRIMA	7 - 1	
STREET ADDRESS	5067 NORTHERN LIGHTS DR	·	STREET ADDRESS		21/10	
CITY-ST-ZIP	GREENACRES, FL 33463			reenalkes, FL. 33		
TITLE NAME		☐ Delete	TITLE NAME		☐ Change ☐ Addition i	
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP	•		
TITLE		. Delete	TITLE		☐ Change . ☐ Addition	
NAME	1		NAME			
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP			
	and if that the information are all of the thin	filing doop not explife for the		d in Chapter 119. Eleride Statutes	I further certify that the information	
indicated	certify that the information supplied with this I on this report or supplemental report is true	and accurate and that my	signature shall have the	e same legal effect as it made unde	er oath; that I am an officer or director nme appears in Block 10 or Block 11 if	