

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003908

FILED
Apr 22, 2004
Secretary of State

Entity Name: GREYSTONE COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

4659 CHEYENNE POINT TR.
KISSIMMEE, FL 34746

New Principal Place of Business:

Current Mailing Address:

4659 CHEYENNE POINT TR.
KISSIMMEE, FL 34746

New Mailing Address:

FEI Number: 59-3756900 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ZUREIQ, MIKE
4659 CHEYENNE POINT TR.
KISSIMMEE, FL 34746

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: DP () Delete
Name: ZUREIQ, MIKE
Address: 4669 CHEYENNE POINT TR.
City-St-Zip: KISSIMMEE, FL 34746

Title: DS () Delete
Name: ZUREIQ, RAED
Address: 4669 CHEYENNA POINT TR.
City-St-Zip: KISSIMMEE, FL 34746

Title: DT () Delete
Name: ZUREIQ, TAMMY
Address: 4669 CHEYENNE POINT TR.
City-St-Zip: KISSIMMEE, FL 34746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: MIKE ZUREIQ

_____ Electronic Signature of Signing Officer or Director

DP

04/22/2004

_____ Date