

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # NO1000008691

1. Entity Name

GRANT COURT VILLAS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2060 HWY A1A STE 308
INDIAN HARBOUR BCH FL 32937

2060 HWY A1A STE 308
INDIAN HARBOUR BCH FL 32937

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3760825

Applied For

Not Applicable

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

FLEIS, EDWARD M
404 PENTLAND DR
MELBOURNE BCH FL 32951

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D FLEIS, EDWARD M
404 PENTLAND DR
MELBOURNE BCH FL 32951

Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D FLEIS, BARBARA A
404 PENTLAND DR
MELBOURNE BCH FL 32951

Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D FLEIS, JEFFREY E
620 JACKSON CT
SATELLITE BCH FL 32937

Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP

FLEIS, EDWARD M.
2060 Highway A1A, Suite 308
Indian Harbour Beach, FL 32937

Change Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

FLEIS, BARBARA A.
2060 Highway A1A, Suite 308
Indian Harbour Beach, FL 32937

Change Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

FLEIS, JEFFREY E.
2060 Highway A1A, Suite 308
Indian Harbour Beach, FL 32937

Change Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

Change Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

Change Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

Change Addition

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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/8/2002

Date

(321) 779-4400

Daytime Phone #

FILED
Apr 09, 2002 8:00 am
Secretary of State

03-06-2002 90103 038 ****61.25

21613



DO NOT WRITE IN THIS SPACE

CP2E037 (9/01)