2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006395

FILED Mar 24, 2009 Secretary of State

Entity Name: GRAND DUNES CONDOMINIUM OWNERS' ASSOCIATION, INC.

	rincipal Plac	e of Business:	New Principal Place	of Business:
	IIC GULF DRI' BEACH, FL			
Current N	lailing Addre	ss:	New Mailing Addres	ss:
SUITE 23	ERALD COAS	ST PKWY WEST 32550 US		
FEI Number	: 55-0857357	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
SUITE 23 MIRAMAR The above	ERALD COAS BEACH, FL		e purpose of changing its registere	ed office or registered agent, or both,
SIGNATU		nic Signature of Registered A	No. or all	Dete
			AGONT	Date
		-	-	
OFFICER	Electro S AND DIREC	-	-	
OFFICER Title: Name: Address: City-St-Zip:	DP (SULLIVAN, JE 219 SCENIC (CTORS:	-	ES TO OFFICERS AND DIRECTORS: () Change () Addition
Title: Name: Address:	DP (SULLIVAN, JE 219 SCENIC (MIRAMAR BEA	Delete RRY SOULF DRIVE, #1350 ACH, FL 32550) Delete AD R WEST	ADDITIONS/CHANG Title: Name: Address:	ES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip: Title: Name: Address:	DP (SULLIVAN, JE 219 SCENIC C MIRAMAR BEA D (BERMAN, BRA 9815 HWY 98 DESTIN, FL 3 DVP (RILEY, DR. DC 219 SCENIC C	Delete RRY GULF DRIVE, #1350 ACH, FL 32550) Delete AD R WEST 2541) Delete	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	ES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: Address:	DP (SULLIVAN, JE 219 SCENIC (MIRAMAR BE, D (BERMAN, BRA 9815 HWY 98 DESTIN, FL 3 DVP (RILEY, DR. DO 219 SCENIC (MIRAMAR BE, TD (BOVIS, JOHN 219 SCENIC (Delete RRY SULF DRIVE, #1350 ACH, FL 32550) Delete AD R WEST 2541) Delete DN GULF DRIVE, #210 ACH, FL 32550) Delete GULF DRIVE, #1410	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	ES TO OFFICERS AND DIRECTORS: () Change () Addition () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JERRY SULLIVAN PD 03/24/2009