

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009496

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: GRAN PARK AT SOUTHPARK PHASE I PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

8427 SOUTHPARK CIRCLE  
SUITE 140  
ORLANDO, FL 32819 US

**New Principal Place of Business:**

**Current Mailing Address:**

8427 SOUTHPARK CIRCLE  
SUITE 140  
ORLANDO, FL 32819 US

**New Mailing Address:**

FEI Number: 20-0391775      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HANSON, KARL B III  
10151 DEERWOOD PARK BLVD.  
BLDG 100, STE 330  
JACKSONVILLE, FL 32256 US

**Name and Address of New Registered Agent:**

HOENER, JAMES A ESQ.  
10151 DEERWOOD PARK BLVD.  
BLDG 100, STE 330  
JACKSONVILLE, FL 32256 US

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: JAMES A. HOENER, ESQ.

04/28/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: STORMES, JEANNE  
Address: 10151 DEERWOOD PARK BLVD, BLDG 100, #330  
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: V ( ) Delete  
Name: SITZER, DIANE  
Address: 8427 SOUTHPARK CIRCLE, SUITE 140  
City-St-Zip: ORLANDO, FL 32819 US

Title: DV ( ) Delete  
Name: MARVIN, GLENN  
Address: 10151 DEERWOOD PARK BLVD, BLDG 100, #330  
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: S ( ) Delete  
Name: HOENER, JAMES A  
Address: 10151 DEERWOOD PARK BLVD BLDG 100 STE 330  
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: VT ( ) Delete  
Name: MUHL, E. JOSEPH JR  
Address: 10151 DEERWOOD PARK BLVD BLDG 100 STE 330  
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: AS ( ) Delete  
Name: POSTON, CHRISTY  
Address: 10151 DEERWOOD PARK BLVD BLDG 100 STE 330  
City-St-Zip: JACKSONVILLE, FL 32256 US

**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:

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 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: JAMES A. HOENER

S

04/28/2008

Electronic Signature of Signing Officer or Director

Date