2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Apr 06, 2007 8:00 am Secretary of State DOCUMENT # N0400005071 04-06-2007 90043 048 ****61.25 THE DUNEDIN GRAND CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 600 EDGEWATER DRIVE **600 EDGEWATER DRIVE** DUNEDIN, FL 34698 DUNEDIN, FL 34698 3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite, Apt. #, etc. 04032007 CR2E037 (12/06) City & State City & State 4. FEI Number - NOT-APPLICABLE 32 - 0179972 Applied For Not Applicable Zio Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GARDNER & GARDNER, P.A. Street Address (P.O. Box Number is Not Acceptable) 611 DRUID ROAD, SUITE 510 CLEARWATER, FL 33756 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Make check payable to 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Added to Fees Due by May 1, 2007 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. PΩ ☐ Delete ☐ Change Addition TITLE TITLE GREENBERG, AARON NAME NAME 142 BAYSIDE DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CLEARWATER, FL 33767 ☐ Delete TITI F ☐ Addition TITLE GREENBERG, MARTIN A NAME NAME 835 MANDALAY AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CLEARWATER, FL 33767 CITY-ST-ZIP Addition ☐ Change TITLE Delete TITLE GREENBERG, MARTIN A NAME NAME STREET ADDRESS 835 MANDALAY AVENUE STREET ADDRESS CITY-ST-ZIP CLEARWATER, FL 33767 CITY-ST-ZIP X Addition ☐ Delete TITLE TITLE

CITY-ST-ZIP I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 all other like empowered.

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY+ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZiP

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

Delete

MICHAEL HERSHEY

DUNEDIN, FL 34698

600 EDGEWATER DR #403

727-686-1556

FILED

☐ Change

☐ Change

☐ Addition

☐ Addition