

FILE NOW: FILING FEE IS \$61.25

FILED
Feb 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N11813 (5)
1. Corporation Name
GRANADA HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business: GRANADA 133 LEISURE LANE, W. P.O. BOX 6147 NALCREST FL 33856-6147 US

Mailing Address: GRANADA 133 LEISURE LN. W. P.O. BOX 6147 NALCREST FL 33856-3147 US

3. Date Incorporated or Qualified: 10/30/1985

4. FEI Number: 59-2877802

Applied For: Not Applicable:

2. Principal Place of Business (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country (25)

2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent: WAGNER, LUTHER A2 GRANADA (A-Z) LEISURE LANE, W. FEDHAVEN FL 33854

10. Name and Address of New Registered Agent: 1332 GRANADA CT. LAKE WALES, FLA. 33853

81 Name: SAME

82 Street Address (P.O. Box Number is Not Acceptable):

83

84 City: FL 85 Zip Code:

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	HORNE, PAULINE M. GRANADA E-1, W. LEISURE LANE NALCREST FL 33856	<input checked="" type="checkbox"/> DELETE	
TITLE: D	OWENS, CHARLES GRANADA E-3, W. LEISURE LANE NALCREST FL 33856	<input type="checkbox"/> DELETE	
TITLE: VPD	FOLEY, WILLIAM GRANADA B-3, W. LEISURE LANE NALCREST FL 33856	<input checked="" type="checkbox"/> DELETE	
TITLE: D	MCLAUGHLIN, CLARA GRANADA C-4, W. LEISURE LANE NALCREST FL 33856	<input checked="" type="checkbox"/> DELETE	
TITLE: TD	WAGNER, LUTHER GRANADA A-Z, LEISURE LANE, W. FEDHAVEN FL 33854	<input type="checkbox"/> DELETE	
TITLE: D	MCTIERNAN, JOSEPH GRANADA H-1, LEISURE LANE, W. NALCREST FL 33856-6147	<input checked="" type="checkbox"/> DELETE	

1.1 TITLE: PD	SUSAN GOEDKEN 1334 GRANADA CT. LAKE WALES, FLA. 33859	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.1 TITLE:		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME:	1453 GRANADA CT. LAKE WALES, FLA. 33853	
2.3 STREET ADDRESS:		
2.4 CITY-ST-ZIP:		
3.1 TITLE:		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME:		
3.3 STREET ADDRESS:		
3.4 CITY-ST-ZIP:		
4.1 TITLE:		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME:		
4.3 STREET ADDRESS:		
4.4 CITY-ST-ZIP:		
5.1 TITLE: TD	1332 GRANADA CT. LAKE WALES, FLA. 33853	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME:		
5.3 STREET ADDRESS:		
5.4 CITY-ST-ZIP:		
6.1 TITLE: D	EDNA AYRES 1582 GRANADA CT. LAKE WALES, FLA. 33853	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME:		
6.3 STREET ADDRESS:		
6.4 CITY-ST-ZIP:		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *A. Luther Wagner* 2-12-96 941-696-1120

CR2E037 (10/97)