

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 22, 2004 8:00 am
Secretary of State

03-22-2004 90038 016 ****61.25

DOCUMENT # N11813
 1. Entity Name
GRANADA HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business Mailing Address
GRANADA A2 LEISURE LN W P.O. BOX 6147
P.O. BOX 6147 NALCREST FL 33856-3147
NALCREST FL 33856-6147 US

54020936



MOORE CR2E037 (11/03)

2. Principal Place of Business 3. Mailing Address
GRANADA C-4 GRANADA C-4
 Suite, Apt. #, etc. Suite, Apt. #, etc.
1324 GRANADA CT 1324 GRANADA CT
 City & State City & State
LAKE WALES FL LAKE WALES FL

Zip Country Zip Country
33898-2712 POLK 33898-2712 POLK

4. FEI Number 59-2877802 Applied For Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
MCDANIEL, HARRY
1305 GRANADA CT
LAKE WALES FL 33853

7. Name and Address of New Registered Agent
 Name **RUMFORD, LAURENCE E**
 Street Address (P.O. Box Number is Not Acceptable)
1324 GRANADA CT
 City **LAKE WALES** FL Zip Code **33898-2712**

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 *Laurence E Rumpf* **LAURENCE E RUMFORD** PRESIDENT GRANADA HOMEOWNERS' ASSOC. MARCH 16, 2004
 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
Due By May 1, 2004

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	RUMFORD, LAURENCE	
STREET ADDRESS	1324 GRANADA CT	
CITY-ST-ZIP	LAKE WALES FL 33853	
TITLE	VD	<input type="checkbox"/> Delete
NAME	GRABER, JOHN	
STREET ADDRESS	1585 GRANADA CT	
CITY-ST-ZIP	LAKE WALES FL 33853	
TITLE	VD	<input type="checkbox"/> Delete
NAME	ARNETT, PAUL	
STREET ADDRESS	1576 GRANADA CT	
CITY-ST-ZIP	LAKE WALES FL 33853	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	MCDANIEL, HARRY	
STREET ADDRESS	1305 GRANADA CT	
CITY-ST-ZIP	LAKE WALES FL 33853	
TITLE	SD	<input type="checkbox"/> Delete
NAME	CHEA, SONG	
STREET ADDRESS	1586 GRANADA COURT	
CITY-ST-ZIP	LAKE WALES FL 33898	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUMFORD, LAURENCE	
STREET ADDRESS	1324 GRANADA CT	
CITY-ST-ZIP	LAKE WALES, FL 33898-2712	
TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRABER, JOHN	
STREET ADDRESS	1585 GRANADA CT	
CITY-ST-ZIP	LAKE WALES, FL 33898	
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ARNETT, PAUL	
STREET ADDRESS	1576 GRANADA CT	
CITY-ST-ZIP	LAKE WALES, FL 33898	
TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PATRICIA GOSKEH	
STREET ADDRESS	1583 GRANADA CT	
CITY-ST-ZIP	LAKE WALES, FL 33898	
TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHEA, SONG	
STREET ADDRESS	1586 GRANADA CT	
CITY-ST-ZIP	LAKE WALES, FL 33898	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 all other like empowered.

SIGNATURE: *Laurence E Rumpf* **LAURENCE E RUMFORD** 3-16-04 863 696-3961
 Signature and typed or printed name of signing officer or director Date Daytime Phone #