## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with an addres

SIGNATURE AND TYPED

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

## Apr 20, 2005 8:00 am Secretary of State DOCUMENT # N47944 04-20-2005 90349 043 \*\*\*\*61.25 GRAND FAIRFIELD HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 4350 NW 19TH AVE SUITE C POMPANO BEACH FL 33064 4350 NW 19TH AVE SUITE C POMPANO BEACH FL 33064 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State City & State 4. FEI Number Applied For 65-0322413 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PALOMBI, GARY Street Address (P.O. Box Number is Not Acceptable) 4350 NW 19TH AVE SUITE C POMPANO BEACH FL 33064 Zip Code FL 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 FILE NOW: FEE IS \$61.25 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be $\Box$ Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10 11. PD TITLE TITLE ☐ Delete Change ☐ Addition GLADSTONE, ROBERT NAME NAME 5462 GRAND PARK PLACE STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33487** CITY-ST-ZIP CITY-ST-7IP Delete TITLE Rie Gioeni Parkfl TITLE **▼** Addition VALENTINE, TREVOR NAME NAME 5401 GRAND PARK PLACE STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33487** CITY-ST-ZIP CITY-ST-ZIP -11115 -TITLE-Delete -Addition NAME VISCOME, JOHN NAME STREET ADDRESS 5394 GRAND PARK PLACE STREET ADDRESS **BOCA RATON FL 33487** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition GERSHON, NOAH NAME NAME 5389 GRAND PARK PLACE STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33487** CITY-ST-ZIP CITY-ST-ZIP Delete THILE stere Greenstein - Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

**FILED** 

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