

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2003 8:00 am
Secretary of State

01-23-2003 90090 037 ****61.25

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1. Entity Name

GRAND HAVEN MASTER ASSOCIATION, INC.



Principal Place of Business

**5 SANDPIPER COURT
PALM COAST FL 32137
US**

Mailing Address

**5 SANDPIPER COURT
PALM COAST FL 32137
US**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3362792**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CULLIS, JAMES T
5 SANDPIPER COURT
PALM COAST FL 32137**

7. Name and Address of New Registered Agent

Name

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

City

FL

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

FILE NOW: FEE IS \$61.25

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	☐ Delete
NAME	CULLIS, JAMES T	
STREET ADDRESS	5 SANDPIPER COURT	
CITY-ST-ZIP	PALM COAST FL 32137	
TITLE	STD	☐ Delete
NAME	GRAHAM, CHERYL	
STREET ADDRESS	5 SANDPIPER CRT	
CITY-ST-ZIP	PALM COAST FL 32137	
TITLE	D	☒ Delete
NAME	CARBONARA, JOSEPH	
STREET ADDRESS	10161 CENTURION PARKWAY N, SUITE 190	
CITY-ST-ZIP	JACKSONVILLE FL 32256	
TITLE	V	☐ Delete
NAME	CARBONARA, JOSEPH III	
STREET ADDRESS	10161 CENTURION PARKWAY N, SUITE 190	
CITY-ST-ZIP	JACKSONVILLE FL 32256	
TITLE	D	☐ Delete
NAME	STIFFLER, TODD	
STREET ADDRESS	5 SANDPIPER CRT	
CITY-ST-ZIP	PALM COAST FL 32137	
TITLE	D	☐ Delete
NAME	SEDIMYER, ROB	
STREET ADDRESS	5 SANDPIPER CRT	
CITY-ST-ZIP	PALM COAST FL 32137	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	☐ Change ☒ Addition
NAME	TOM LAWRENCE	
STREET ADDRESS	5 SANDPIPER CRT	
CITY-ST-ZIP	PALM COAST FL 32137	
TITLE	Pete Chido	☐ Change ☒ Addition
NAME	5 SANDPIPER CRT	
STREET ADDRESS	PALM COAST FL 32137	
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ 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: SIGNATURE REQUIRED

CR2E037 (10/02)