

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763117

FILED
Apr 10, 2007
Secretary of State

Entity Name: GRANADA PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

720 CORAL WAY
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

720 CORAL WAY
SUITE G-1
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 59-2215885

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ISALGUE, ULISES M
720 CORAL WAY
SUITE 5E
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ISALGUE, ULISES
Address: 720 CORAL WY, SE
City-St-Zip: CORAL GABLES, FL 33134

Title: VPD () Delete
Name: ALFANO, JOSEPH
Address: 720 CORAL WY, #2 B
City-St-Zip: CORAL GABLES, FL 33134

Title: SD () Delete
Name: LARCADA, ALBERTO
Address: 720 CORAL WY, # 6 A
City-St-Zip: CORAL GABLES, FL 33134

Title: TD () Delete
Name: HERRERA, PROCOPIO
Address: 720 CORAL WY, # 4 A
City-St-Zip: CORAL GABLES, FL 33134

Title: D () Delete
Name: STIEFEL, BARBARA
Address: 720 CORAL WY, # 10 A
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ALFANO, JOSEPH
Address: 720 CORAL WY, 2-B
City-St-Zip: CORAL GABLES, FL 33134

Title: VPD (X) Change () Addition
Name: ISALGUE, ULISES
Address: 720 CORAL WY, # 5-E
City-St-Zip: CORAL GABLES, FL 33134

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH ALFANO

PD

04/10/2007

Electronic Signature of Signing Officer or Director

Date