2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2006 8:00 am
Secretary of State
03-14-2006 90033 029 ****61.25

DOCUMENT # 710668

1. Entity Name
GREENBRIER ASSOCIATION , INC.,

Principal Place of Business	Mailing Address
50 CELESTIAL WAY JUNO BEACH, FL 33408	50 CELESTIAL WAY JUNO BEACH, FL 33408

02212006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-1160446 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HESTER, DONALD L 50 CELESTIAL WAY JUNO BEACH, FL 33408	Name: Stephen SbAbandy Street Address (P.O. Box Number is Not Acceptable): 1340 U.S #1 Suite 102 City: Jupiter FL Zip Code: 33469

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: _____ For Board of Directors 3-6-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P CHENETTE, HENRY 50 CELESTIAL WAY JUNO BEACH, FL 33408	☐ Delete	T John FOX 50 celestial way Juno Beach, FL 33408	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP WEBSTER, BARRY 50 CELESTIAL WAY JUNO BEACH, FL 33408	☐ Delete	D John Kurilla 50 celestial way Juno Beach, FL 33408	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T CLEMENTS, MARION 50 CELESTIAL WAY JUNO BEACH, FL 33408	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S WALCZAK, SANDY 50 CELESTIAL WAY JUNO BEACH, FL 33408	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D EBERT, DENISE 50 CELESTIAL WAY JUNO BEACH, FL 33408	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ELTZ, MARIE 50 CELESTIAL WAY JUNO BEACH, FL 33408	☒ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____ Pres. 3-10-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #