

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725017

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: MILES GRANT CONDOMINIUM ONE, INC.

## Current Principal Place of Business:

5425 SE MILES GRANT RD  
STUART, FL 349971826 US

## New Principal Place of Business:

## Current Mailing Address:

5425 SE MILES GRANT RD  
STUART, FL 349971826 US

## New Mailing Address:

FEI Number: 59-1455510

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GALLIVAN, JAMES  
5403 SE MILES GRAVY RD  
H207  
STUART, FL 34997 US

## Name and Address of New Registered Agent:

GALLIVAN, JAMES  
5403 SE MILES GRANT RD  
H207  
STUART, FL 34997 US

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: JAMES GALLIVAN

04/15/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: LEE, JEAN  
Address: 5413 SE MILES GRAVY RD G104  
City-St-Zip: STUART, FL 34997

Title: D ( ) Delete  
Name: BROOKS, PATRICIA  
Address: 5463 SE MILES GRANT RD B-205  
City-St-Zip: STUART, FL 34997

Title: D ( ) Delete  
Name: GIESLER, GENE  
Address: 5403 SE MILES GRAVY RD H112  
City-St-Zip: STUART, FL 34997

Title: SD ( ) Delete  
Name: KADLEC, CONSTANCE  
Address: 5463 SE MILES GRANT RD. B-204  
City-St-Zip: STUART, FL 34997

Title: TD ( ) Delete  
Name: GALLIVAN, JAMES  
Address: 5403 S.E. MILES GRANT RD H-207  
City-St-Zip: STUART, FL 34997

Title: D ( ) Delete  
Name: MCWATERS, ART  
Address: 5463 S.E. MILES GRANT RD B-101  
City-St-Zip: STUART, FL 34997

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change ( ) Addition  
Name: LEE, JEAN  
Address: 5413 SE MILES GRANT RD G104  
City-St-Zip: STUART, FL 34997

Title: D (X) Change ( ) Addition  
Name: BROOKS, PATRICIA  
Address: 5463 SE MILES GRANT RD B-205  
City-St-Zip: STUART, FL 34997

Title: D (X) Change ( ) Addition  
Name: GIESLER, GENE  
Address: 5403 SE MILES GRANT RD H112  
City-St-Zip: STUART, FL 34997

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

Title: TD (X) Change ( ) Addition  
Name: GALLIVAN, JAMES  
Address: 5403 S.E. MILES GRANT RD H-207  
City-St-Zip: STUART, FL 34997

Title: PD (X) Change ( ) Addition  
Name: RICHARDS, CAROL  
Address: 5433 S.E. MILES GRANT RD E-205  
City-St-Zip: STUART, FL 34997

I hereby certify that the information supplied with this filing does not qualify 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: JAMES GALLIVAN

TD

04/15/2009

Electronic Signature of Signing Officer or Director

Date