

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745576

FILED
Mar 18, 2009
Secretary of State

Entity Name: GRANT PLACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2016 S. GRANT PLACE, #10
MELBOURNE, FL 32901

New Principal Place of Business:

2012 S. GRANT PLACE, #18
MELBOURNE, FL 32901

Current Mailing Address:

1900 S. HARBOR CITY BLVD
SUITE 200
MELBOURNE, FL 32901 US

New Mailing Address:

FEI Number: 59-2949166 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

TUBITO, FRANK
1900 S. HARBOR CITY BLVD
STE 200
MELBOURNE, FL 32901 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: SVP () Delete
Name: WELCH, RON
Address: 2012 GRANT PLACE #15
City-St-Zip: MELBOURNE, FL 32901

Title: PD () Delete
Name: TUBITO, FRANK
Address: 2012 BRANT PL #18
City-St-Zip: MELBOURNE, FL 32901

Title: T () Delete
Name: ROBINSON, ANNY
Address: 2108 GRANT PL. #4
City-St-Zip: MELBOURNE, FL 32901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SVP (X) Change () Addition
Name: WELCH, RON SVP
Address: 2012 GRANT PLACE #15
City-St-Zip: MELBOURNE, FL 32901

Title: PD (X) Change () Addition
Name: TUBITO, FRANK PD
Address: 2012 BRANT PL #18
City-St-Zip: MELBOURNE, FL 32901

Title: T (X) Change () Addition
Name: ROBINSON, ANNY T
Address: 2108 GRANT PL. #4
City-St-Zip: MELBOURNE, FL 32901

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: FRANK TUBITO

PD

03/18/2009

Electronic Signature of Signing Officer or Director

Date