

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2008 8:00 am
Secretary of State

04-07-2008 90059 036 ****61.25

DOCUMENT # 752268
 1. Entity Name
THE GRANDVIEW CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
741 S COLLIER BLVD
MARCO ISLAND, FL 34145

Mailing Address
P.O. BOX 39
MARCO, FL 34146

40061589



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 Zip Country

03262008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2152410

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

WILL, JEFFREY
601 ELKCAM CIRCLE, B-16
MARCO ISLAND, FL 34145

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

Filing Fee is \$61.25
Due by May 1, 2008

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	S	<input type="checkbox"/> Delete
NAME	MEADOWS, JOHN	
STREET ADDRESS	5 DRAPER STREET	
CITY-ST-ZIP	NATICK, MA 01760	
TITLE	T	<input type="checkbox"/> Delete
NAME	WITHERINGTON, CHARLES	
STREET ADDRESS	142 BASTILLE CT	
CITY-ST-ZIP	WILLIAMSBURG, VA 23185	
TITLE	VP	<input type="checkbox"/> Delete
NAME	DURFEE, JAMES	
STREET ADDRESS	77 WENTWORTH AVE	
CITY-ST-ZIP	LOWELL, MA 01852	
TITLE	D	<input type="checkbox"/> Delete
NAME	SAWYER, RICHARD	
STREET ADDRESS	115 WENDELL TERRACE	
CITY-ST-ZIP	SYRACUSE, NY 13203	
TITLE	P	<input type="checkbox"/> Delete
NAME	DAVIS, STEWART W	
STREET ADDRESS	741 S. COLLIER BLVD.	
CITY-ST-ZIP	MARCO ISLAND, FL 34145	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: Jeffrey Will **not Agent** Date: 4/1/08 Daytime Phone #: (239) 394-1101