

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 14, 2009
Secretary of State**

DOCUMENT# 760590

Entity Name: GRANADA PLAZA CONDOMINIUM OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2331 N FEDERAL HWY
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

2331 N FEDERAL HWY
STUART, FL 34994

New Mailing Address:

FEI Number: 59-2565581 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WRIGHT, ELIZABETH
2327 N FEDERAL HWY
STUART, FL 34994 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: DP () Delete
Name: WRIGHT, ELIZABETH
Address: 2327 N FEDERAL HWY
City-St-Zip: STUART, FL 34994

Title: DT () Delete
Name: FENLASON, JARRED
Address: 2303 N FEDERAL HWY
City-St-Zip: STUART, FL 34994

Title: DS () Delete
Name: WEST, JANA
Address: 2315 N FEDERAL HWY
City-St-Zip: STUART, FL 34994

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DT (X) Change () Addition
Name: FENLASON, JARRED
Address: 1034 NW PINE LAKE DRIVE
City-St-Zip: STUART, FL 34994

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

Title: D () Change (X) Addition
Name: DEMAIO, PAUL A
Address: 2323 NW FEDERAL HIGHWAY
City-St-Zip: STUART, FL 34994

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: JARRED FENLASON

DT

01/14/2009

Electronic Signature of Signing Officer or Director

_____ Date