2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 20, 2005 8:00 am Secretary of State

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DOCUMENT # J45854 1. Entity Name GRUDEM PROPERTIES, INCORPORATED							00311 021 ***15		
Principal Place of Business Mailing Address					1				
430 VILLAGE PL		430 VILLAGE PL				400			
APT 320 Longwood, FL 32779 US		APT 320 Longwood, Fl 32779 US			39130	BIRSI AKBII BIBII BIRII AKBII BIBI			
2. Principal Place of Business		3. Mailing Address 16355 N 108TH WAY							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03112005	Chg-P	CR2E034 (10/03)			
City & State		City & State			4. FEI Numbe	ſ	Ar	oplied For	
7in County		SCOTTSDALE AZ			59-2747279 Not Applicable				
Zip	Country	8525 5	Country · USA		5. Certificate of	of Status Desired	S8.75 Add Fee Require		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
GRUDEM, ARDEN E.				Name					
430 VILLA	GE PL APT 320	Street Address (P.O. Box Number is Not Acceptable)					
LONGWO	OD, FL 32779								
			City				Zip Cod	e	
8. The above named entity submits this statement for the purpose of changing its register				v ragistar	ad agent, or bath	is the State of Fla			
the obligat	ions of registered agent.	the purpose of changing its f	egistered embert	register	ed agent, or bott	i, in the State of Flor	ida. Tam lamiliai wim,	ани ассері	
SIGNATURE	Ž.								
	Signature, typed or printed name of registered agent a	nd little if applicable. (NOTE:	Registered Agent signs	lure required	when reinstating)		DATE		
FILE NOWIII FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees									
10.	F OFFICERS AND	DIRECTORS	11.		ADDITIONS/0	CHANGES TO OFFIC	CERS AND DIRECTORS	S IN 11	
TITLE	DP .S	☐ Delete	TITLE	D			X Change	Addition	
NAME STREET ADDRESS	GRUDEM, ARDEN E. 430 VILLAGE PL APT 320		NAME STREET ADDRESS	GRUD	EM, ARDE	N E			
CITY-ST-ZIP	LONGWOOD, FL 32779		CITY-ST-ZIP		VILLAGE WOOD_FL	PL APT 320)		
TITLE	DS	☐ Delete	TITLE	D				Addition	
NAME Street address	GRUDEM, JEAN C. 430 VILLAGE PL APT 320		NAME STREET ADDRESS:	GRUD	EM, JEAN	C PL APT 320	1		
CITY-ST-ZIP	LONGWOOD, FL 32779	•	CITY-ST-ZIP		WOOD FL	= :	,		
TITLE	D	☐ Delete	TITLE	DPT			X Change	☐ Addition	
NAME STREET ADDRESS	GRUDEM, WAYNE 16355 N 108TH WAY	•	NAME		EM, WAYN				
CITY-ST-ZIP	SCOTTSDALE, AZ 8525		STREET ADDRESS CITY-ST-ZIP	1635 SCOT	5 N 108T TSDALE A	H WAY Z 8525 €			
TITLE	D	☐ Delete	TITLE	DVPS		2 03230	X Change	☐ Addition	
NAME STREET ADDRESS	GRUDEM, GREG		NAME	GRUD	EM, GREG	G			
CITY-ST-ZIP	1631 29TH AVE. HAUGEN, WI 54841		STREET ADDRESS CITY-ST-ZIP		29TH AV EN WI 54				
TITLE		☐ Delete	TITLE	111100	<u></u>	041	Change	☐ Addition	
NAME CIRCEL ADORECE			NAME						
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP						
TITLE		☐ Delete	TITLE	 		.	Change	Addition	
NAME			NAME						
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP						
			=						

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attacpment with an address, with ell-other like empowered.

SIGNATURE: _

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-24-05

480-473-2107

Daytime Phone #