2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004 8:00 am
Secretary of State
04-22-2004 90028 026 ****61.25

DOCUMENT # N00000005904

1. Entity Name
GRANDEZZA MASTER PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
5692 STRAND BLVD. SUITE 1 NAPLES, FL 34110	5692 STRAND BLVD. SUITE 1 NAPLES, FL 34110

04192004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
4501 Tamiami Trail No	4501 Tamiami Trail No
Suite, Apt. #, etc.: Suite 300	Suite, Apt. #, etc.: Suite 300
City & State: Naples, FL	City & State: Naples, FL
Zip: 34103 Country:	Zip: 34103 Country:

4. FEI Number 59-3675222 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

COLEMAN, KEVIN G ESQ.
GOODLETTE, COLEMAN & JOHNSON, PA
4001 TAMIAMI TRAIL N, SUITE 300
NAPLES, FL 34103

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, 2004

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STOCK, K.C. 5692 STRAND COURT, SUITE 1 NAPLES, FL 34110	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STOCK, BRIAN K 5692 STRAND COURT, SUITE 1 NAPLES, FL 34110	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP BLACK, BRAD 5692 STRAND COURT, SUITE 1 NAPLES, FL 34110	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP WEBER, BETH 5692 STRAND BLVD, SUITE 1 NAPLES, FL 34110	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST HOULDSWORTH, SANDRA J 5692 STRAND BLVD, SUITE 1 NAPLES, FL 34110	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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 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: Sandra J Houldsworth 4-15-04 239-592-7344
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #