## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0000005904

FILED Apr 07, 2009 Secretary of State

Entity Name: GRANDEZZA MASTER PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
SUITE 4	LANDING DI PRINGS, FL					
Current Mailing Address:			New Maili	New Mailing Address:		
27180 BAY LANDING DR SUITE 4 BONITA SPRINGS, FL 34135						
FEI Number:	59-3675222	FEI Number Applied For ( )	FEI Number Not App	olicable ( ) Certificate of Status Desired ( )		
Name and	Address of (	Current Registered Agent:	Name and	d Address of New Registered Agent:		
STERLING PROPERTY SERVICES 27180 BAY LANDING DR SUITE 4 BONITA SPRINGS, FL 34135 US						
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:						
	Electro	nic Signature of Registered Ager		Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D ( ISAACS, MADE 12555 GRAND ESTERO, FL	EZZA CIRCLE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	VP ( PISA, ROBER 11544 AMALFI ESTERO, FL	WAY	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	HUGHES, TOM	VARD CROSSING	Title: Name: Address: City-St-Zip:	DST (X) Change ( ) Addition SCHRIML, MICHAEL 20140 SEAGROVE STREET #2608 ESTERO, FL 33928		
Title: Name: Address: City-St-Zip:	PINNEL, ROBE	VARD CROSSING	Title: Name: Address: City-St-Zip:	PD (X) Change ( ) Addition CAMPANILE, ANGELO 20210 BURNSIDE PL #1903 ESTERO, FL 33928		
Title: Name: Address: City-St-Zip:	GREENWALD	ARD CROSSING	Title: Name: Address: City-St-Zip:	S (X) Change ( ) Addition LEROY, MARGARET 20049 BUTTERMERE CT ESTERO, FL 33928		
Title: Name: Address: City-St-Zip:	D ( SULLIVAN, AR P.O. BOX 722 ESTERO, FL		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		

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: ANGELO CAMPANILE PD 04/07/2009