

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**


FILED
Aug 11, 2003 8:00 am
Secretary of State

08-11-2003 90292 015 ****61.25

0014827

DOCUMENT # N00000006285

1. Entity Name
GRANDEZZA PRESERVE ASSOCIATION, INC.



Principal Place of Business Mailing Address

**5692 STRAND BLVD. STE 1
NAPLES FL 34110** **5692 STRAND BLVD. STE 1
NAPLES FL 34110**

2. Principal Place of Business 3. Mailing Address

5692 Strand Blvd #1 **5692 Strand Blvd**

Suite, Apt. #, etc. Suite, Apt. #, etc.


#1 **#1**

City & State City & State

Naples FL **Naples FL**

Zip Country Zip Country

34110 **USA** **34110** **USA**



CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3675230** Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SALVATORI, LEO
4501 TAMiami TRAIL NORTH
NAPLES FL 34103

7. Name and Address of New Registered Agent

Name **Brian Stock**

Street Address (P.O. Box Number is Not Acceptable) **5692 Strand Blvd #1**

City **Naples** FL Zip Code **34110**

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 **Brian Stock** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25

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	DP	<input type="checkbox"/> Delete
NAME	HARDY, ROBERT PAUL	
STREET ADDRESS	5692 STRAND BLVD, STE 1	
CITY-ST-ZIP	NAPLES FL 34110	
TITLE	DST	<input type="checkbox"/> Delete
NAME	TEETS, JR., FRANK D	
STREET ADDRESS	5692 STRAND BLVD, STE 1	
CITY-ST-ZIP	NAPLES FL 34110	
TITLE	DV	<input type="checkbox"/> Delete
NAME	TOLSON, RENEE	
STREET ADDRESS	5692 STRAND BLVD, STE 1	
CITY-ST-ZIP	NAPLES FL 34110	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Brian Stock	
STREET ADDRESS	5692 Strand Blvd #1	
CITY-ST-ZIP	Naples FL 34110	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Brad Black	
STREET ADDRESS	5692 Strand Blvd #1	
CITY-ST-ZIP	Naples FL 34110	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Sandy Holdsworth	
STREET ADDRESS	5692 Strand Blvd #1	
CITY-ST-ZIP	Naples FL 34110	
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 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: **Brian Stock** SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date **8/8/03** Daytime Phone # **239 592 7344**

CR2E037 (4/03)