2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006567

Apr 27, 2009 Secretary of State

Entity Name: GRANDE CAY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O PINES PROPERTY MGNT. 19620 PINES BLVD, STE 205 PEMBROKE PINES, FL 33029

New Mailing Address: Current Mailing Address:

C/O PINES PROPERTY MGNT. P O BOX 820100 SO. FLORIDA, FL 33082

FEI Number: 65-1072306 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STEVENS & GOLDWYN, P.A 2 SOUTH UNIVERSITY DR #210 PLANTATION, FL 33324

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:

Name:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition OCASIO, GEORGE LEVY, JOSE Name: Name: 2057 SW 176 TERR Address: 2108 SW 176 TERR Address: City-St-Zip: MIRAMAR, FL 33029 City-St-Zip: MIRAMAR, FL 33029

Title: () Delete Title: (X) Change () Addition MARTINEZ, CINDY Name: MARTINEZ, CINDY Name:

Address: 2128 SW 176 AVE Address: 2128 SW 176 AVE City-St-Zip: MIRAMAR, FL 33029 City-St-Zip: MIRAMAR, FL 33029

Title: () Delete Title: (X) Change () Addition

GARWACKI, JUAN GARWACKI, JUAN Name: Name: Address: 2047 SW 176 TERR. Address: 2047 SW 176 TERR. City-St-Zip: HOLLYWOOD, FL 33029 City-St-Zip: HOLLYWOOD, FL 33029

Title: 2VP (X) Delete Title: () Change () Addition

ROSEN, HEIDI Name: Address: 2082 SW 176 AVE Address: City-St-Zip: MIRAMAR, FL 33029 City-St-Zip:

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: JOSE LEVY PD 04/27/2009