

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

06 MAY 18 PM 1:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03232006 Chg-NP CR2E037 (11/05)

DOCUMENT # N01000001371			
1. Entity Name SARACENO AT GRANDEZZA HOMEOWNERS ASSOCIATION, INC.			
Principal Place of Business 4501 TAMIAMI TRAIL NO. SUITE 300 NAPLES, FL 34103		Mailing Address 4501 TAMIAMI TRAIL NO SUITE 300 NAPLES, FL 34103	
2. Principal Place of Business 4980 Tamiami Trail N.		3. Mailing Address 4980 Tamiami Trail N.	
Suite, Apt. #, etc. SUITE 101		Suite, Apt. #, etc. SUITE 101	
City & State NAPLES, FL		City & State NAPLES, FL	
Zip 34103		Zip 34103	
Country USA		Country USA	
4. FEI Number 59-3660474		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent STOCK COMMUNITY SERVICES, INC. BANK COMMERCE CENTER 4501 TAMIAMI TRAIL NO., SUITE 300 NAPLES, FL 34103		7. Name and Address of New Registered Agent Name STOCK PROPERTY MANAGEMENT, LLC Street Address (P.O. Box Number is Not Acceptable) 4980 TAMIAMI TRAIL NORTH Suite 101 City NAPLES FL Zip Code 34103	
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  BOB DELANEY		DATE 3/23/06	
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	PD BLACK, BRAD <input checked="" type="checkbox"/> Delete 4501 TAMIAMI TRL NO #300 NAPLES, FL 34103	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition ROBERT SCHMIOT 20032 20073 SARACENO DR. ESTERO, FL 33928
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVP <input checked="" type="checkbox"/> Delete HOULDSWORTH, SANDRA 4501 TAMIAMI TRL NO #300 NAPLES, FL 34103	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition RICHARD HALDEMAN 20109 SARACENO DR. ESTERO, FL 33928
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DST <input checked="" type="checkbox"/> Delete TIEFENBACH, RENEE 4501 TAMIAMI TRL NO #3000 NAPLES, FL 34110	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DST <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition ROBERT GARCIA 20117 SARACENO DR. ESTERO, FL 33928
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 700075972097 06/08/06--01007--004 **64.25
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  BOB DELANEY		DATE 3/23/06 PLS-9500	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	



K. Eckel MAY 24 2006