


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 13, 2005 8:00 am
Secretary of State

04-13-2005 90019 016 ****70.00

DOCUMENT # N01000001958
 1. Entity Name
GRAND HAVEN MASTER HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business Mailing Address
6005 N WICKHAM RD A-51 MELBOURNE FL 32940 **P.O. BOX 411988 MELBOURNE FL 32941**



2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

1st MOORE CR2E037 (10/04)

City & State City & State

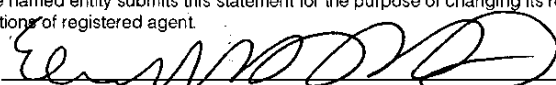
4. FEI Number **59-3723844** Applied For Not Applicable

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent
MCCLUNEY, LUCILLE B
6005 N WICKHAM RD
STE A-51
MELBOURNE FL 32940

7. Name and Address of New Registered Agent
 Name **Elizabeth Peppmiller**
 Street Address (P.O. Box Number is Not Acceptable) **6005 N. Wickham R**
A-51
 City **Melbourne** FL Zip Code **32940**

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  **Elizabeth Peppmiller**
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) **President** DATE **4-4-05**

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

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	P	<input checked="" type="checkbox"/> Delete
NAME	MCCLUNEY, LUCILLE B	
STREET ADDRESS	6005 N WICKHAM RD STE A-51	
CITY-ST-ZIP	MELBOURNE FL 32940	
TITLE	V	<input type="checkbox"/> Delete
NAME	PEPMILLER, BETH	
STREET ADDRESS	6005 N WICKHAM RD STE A-51	
CITY-ST-ZIP	MELBOURNE FL 32940	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	CARABETTA, NITA	
STREET ADDRESS	6005 N WICKHAM RD STE A-51	
CITY-ST-ZIP	MELBOURNE FL 32940	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	ROBERTS, ERIN D	
STREET ADDRESS	6005 N WICKHAM RD STE A-51	
CITY-ST-ZIP	MELBOURNE FL 32940	
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 type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PEPMILLER, BETH	
STREET ADDRESS	3911 Orchard Dr	
CITY-ST-ZIP	Melbourne, FL 32940	
TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BRENDA RAYER	
STREET ADDRESS	4478 CHASTAIN DR	
CITY-ST-ZIP	MELBOURNE, FL 32940	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JANIE DeSpain	
STREET ADDRESS	4549 CHASTAIN DR	
CITY-ST-ZIP	MELBOURNE FL 32940	
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Cheryl McNeilly	
STREET ADDRESS	3852 Stream Dr	
CITY-ST-ZIP	Melbourne, FL 32940	
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:  **BRENDA RAYER-TREA** **4-6-05** **321-253-3013**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #