2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001958

FILED Mar 30, 2009 Secretary of State

Entity Name: GRAND HAVEN MASTER HOMEOWNERS ASSOCIATION, INC.

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

6939 N WICKHAM RD MELBOURNE, FL 32940

Current Mailing Address: New Mailing Address:

P.O. BOX 411988 MELBOURNE, FL 32941

FEI Number: 59-3723844 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:

MCNEILLY, CHERYL

3852 SSTREAM DR

MELBOURNE, FL 32940 US

STEWART, FRANCIS M
6939 N WICKHAM ROAD
MELBOURNE, FL 32940 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: FRANCIS STEWART 03/30/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T () Delete Title: P (X) Change () Addition Name: MIDDLEBROOK, DON Name: HAUSAVER, ALBERT R

 Address:
 4509 CHASTAIN DR
 Address:
 4083 ORCHARD DR

 City-St-Zip:
 MELBOURNE, FL 32940
 City-St-Zip: MELBOURNE, FL 32940

Title: S () Delete Title: () Change () Addition Name: POWERS, CAROL Name:

 Name:
 POWERS, CAROL
 Name:

 Address:
 4387 FOUR LAKES DR
 Address:

 City-St-Zip:
 MELBOURNE, FL 32940
 City-St-Zip:

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

 Name:
 MCNEILLY, CHERYL
 Name:
 MCNEILLY, CHERYL

 Address:
 3852 STREAM DR
 Address:
 3852 STREAM DR

 City-St-Zip:
 MELBOURNE, FL 32940
 City-St-Zip:
 MELBOURNE, FL 32940

Title: V () Delete Title: () Change () Addition

 Name:
 CORTES, TONY
 Name:

 Address:
 3935 FERNROSE CIR
 Address:

 City-St-Zip:
 MELBOURNE, FL 32940
 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: CHERYL MCNEILLY T 03/30/2009