

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Jul 11, 2007**  
**Secretary of State**

DOCUMENT# N02000006449

**Entity Name:** THE GRANDVIEW OF TAMPA CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**371 CHANNELSIDE WALK WAY  
TAMPA, FL 33602 US**New Principal Place of Business:****Current Mailing Address:**3001 EXECUTIVE DRIVE  
SUITE 260  
CLEARWATER, FL 33762 US**New Mailing Address:**PO BOX 14357  
CLEARWATER, FL 33766 US**FEI Number:** 32-0032721**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**CONDOMINIUM ASSOCIATES  
777 S. HARBOUR ISLAND BLVD.  
SUITE 270  
TAMPA, FL 33602 US**Name and Address of New Registered Agent:**AMERI-TECH REALTY, INC.  
1799-B NORTH BELCHER ROAD  
CLEARWATER, FL 33765 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: MICHAEL G PEREZ, PRESIDENT

07/11/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: OVERBY, CAROL  
Address: 371 CHANNELSIDE WALKWAY #604  
City-St-Zip: TAMPA, FL 33602

Title: DVP ( ) Delete  
Name: HODGE, DAVID  
Address: 371 CHANNELSIDE WAL WAY #602  
City-St-Zip: TAMPA, FL 33602

Title: DST ( ) Delete  
Name: MIZNER, JEFF  
Address: 371 CHANNELSIDE WALK WAY #402  
City-St-Zip: TAMPA, FL 33602

Title: D ( ) Delete  
Name: KOUWE, JEAN  
Address: 371 CHANNELSIDE WALK WAY #801  
City-St-Zip: TAMPA, FL 33602

Title: D ( ) Delete  
Name: ALVAREZ, MANUEL  
Address: 371 CHANNELSIDE WALK WAY #1104  
City-St-Zip: TAMPA, FL 33602

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: CAROL OVERBY

DP

07/11/2007

Electronic Signature of Signing Officer or Director

Date