

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2006 8:00 am
Secretary of State

03-16-2006 90233 008 ****61.25

DOCUMENT # N02000007128					
1. Entity Name GRANDVIEW LANDINGS HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 214 HILLCREST ST STE 2 LAKE LAND, FL 33815			Mailing Address 214 HILLCREST ST STE 2 LAKE LAND, FL 33815		
2. Principal Place of Business 5600 US Hwy 98N		3. Mailing Address PO Box 92108			
Suite, Apt. #, etc. SUITE #1		Suite, Apt. #, etc.			
City & State LAKE LAND, FL		City & State LAKE LAND, FL			
Zip 33809		Country USA		Zip 33804	
Country USA		4. FEI Number 20-0677194			
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MCQUILLEN, DUANE 214 HILLCREST ST STE 2 LAKE LAND, FL 33815			7. Name and Address of New Registered Agent Name: Wm. R. HARKINS Street Address (P.O. Box Number is Not Acceptable): 5600 U.S. Hwy 98N. SUITE #1 City: LAKE LAND, FL Zip Code: 33809		
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: <i>Wm. R. Harkins, EA</i> DATE: 3/7/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing <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	D MCQUILLEN, DUANE 214 HILLCREST ST STE 2 LAKE LAND, FL 33815	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D-P WILSON, RICK 5644 HILLSIDE LANDINGS RD LAKE LAND, FL 33810	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCQUILLEN, NORMA 214 HILLCREST ST STE 2 LAKE LAND, FL 33815	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D-V HUFFMAN, DON 1911 VIEWPOINT LANDINGS RD LAKE LAND, FL 33810	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MERRITT, YVONNE B 5454 MOON VALLEY DR LAKE LAND, FL 33813	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D-S THORPE, CHUCK 5541 HILLSIDE LANDINGS RD LAKE LAND, FL 33810	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D-T THORPE, ROBIN 5541 HILLSIDE LANDINGS RD LAKE LAND, FL 33810	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JAMES, KATHY 1429 VIEWPOINT LANDINGS RD LAKE LAND, FL 33810	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<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: <i>Wm. R. Harkins</i>			Date: 3/13/06		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date</small>		