


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 20, 2006 08:00 AM
Secretary of State**

DOCUMENT # N02272 1. Entity Name GRANADA III OWNERS' ASSOCIATION, INC.		
Principal Place of Business 1326 GRANADA CT C/O JACKIE WATERS LAKE WALES, FL 33898 US	Mailing Address 1326 GRANADA CT C/O JACKIE WATERS LAKE WALES, FL 33898 US	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent WATERS, JACKIE 1326 GRANADA CT LAKE WALES, FL 33898-2712		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
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
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BATTIST, CLARA 1323 GRANADA CT LAKE WALES, FL 33898	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD VALERIO, THOMAS 1322 GRANADA CT LAKE WALES, FL 33898	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD WATERS, JACKIE 1326 GRANADA CT LAKE WALES, FL 338982712	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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>Clara Battist</i> CLARA BATTIST <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		1-17-06 Date Daytime Phone # 863-696-7031



01112006 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-3228779	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

11/25/06-80009-010 61.25

**DO NOT WRITE
IN THIS SPACE**