

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 25, 2005 8:00 am**  
**Secretary of State**

04-25-2005 90289 040 \*\*\*\*61.25

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                 |                                                                                                                                                                                                                                                       |                                           |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|
| <b>DOCUMENT # N03000004127</b><br>1. Entity Name<br><b>GRANDE DOMINICA AT THE GRANDE PRESERVE<br/>CONDOMINIUM ASSOCIATION, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |                                                                                                                                                                      |                                           |
| Principal Place of Business<br><b>C/O 5551 RIDGEWOOD DRIVE<br/>SUITE 203<br/>NAPLES, FL 34108</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                 | Mailing Address<br><b>6732 LONE OAK BLVD.<br/>NAPLES, FL 34109</b>                                                                                                                                                                                    |                                           |
| 2. Principal Place of Business<br>Suite, Apt. #, etc.<br><b>295 GRANDE WAY</b><br>City & State<br><b>NAPLES, FL 34119</b><br>Zip Country                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                 | 3. Mailing Address<br><b>3050 N. Horseshoe Drive</b><br>Suite, Apt. #, etc.<br><b>Suite #275</b><br>City & State<br><b>NAPLES, FL 34104</b><br>Zip Country                                                                                            |                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                 |                                                                                                                                                                     |                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                 | 03162005 Chg-NP CR2E037 (10/03)                                                                                                                                                                                                                       |                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                 | 4. FEI Number<br><b>05-0569583</b>                                                                                                                                                                                                                    |                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                 | Applied For<br><input type="checkbox"/> Not Applicable                                                                                                                                                                                                |                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                 | 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>                                                                                                                                                       |                                           |
| 6. Name and Address of Current Registered Agent<br><br><b>GRANT, RICHARD C<br/>5551 RIDGEWOOD DRIVE<br/>SUITE 501<br/>NAPLES, FL 34108</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                 | 7. Name and Address of New Registered Agent<br>Name<br><b>KRAMER-TRIAD MANAGEMENT GROUP LLC</b><br>Street Address (P.O. Box Number is Not Acceptable)<br><b>3050 N. HORSESHOE DR. SUITE 275</b><br><b>NAPLES, FL 34104</b><br>City <b>FL</b> Zip Code |                                           |
| 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 _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                 |                                                                                                                                                                                                                                                       |                                           |
| <b>Filing Fee is \$61.25<br/>Due by May 1, 2005</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>                                                                                                                                |                                           |
| <b>Make check payable to<br/>Florida Department of State</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                 |                                                                                                                                                                                                                                                       |                                           |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                 | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10                                                                                                                                                                                                 |                                           |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | D<br>CORACE, RICHARD F          | <input checked="" type="checkbox"/> Delete                                                                                                                                                                                                            | TITLE<br>PRESIDENT<br>Richard Whittington |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 5551 RIDGEWOOD DRIVE, SUITE 203 |                                                                                                                                                                                                                                                       | NAME                                      |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | NAPLES, FL 34108                |                                                                                                                                                                                                                                                       | STREET ADDRESS                            |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                 |                                                                                                                                                                                                                                                       | CITY-ST-ZIP<br>NAPLES FL 34119            |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | D                               | <input checked="" type="checkbox"/> Delete                                                                                                                                                                                                            | TITLE                                     |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | GRIFFIN, GERALD F.              |                                                                                                                                                                                                                                                       | NAME                                      |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 5551 RIDGEWOOD DRIVE, SUITE 203 |                                                                                                                                                                                                                                                       | STREET ADDRESS                            |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | NAPLES, FL 34108                |                                                                                                                                                                                                                                                       | CITY-ST-ZIP<br>NAPLES FL 34119            |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | D                               | <input checked="" type="checkbox"/> Delete                                                                                                                                                                                                            | TITLE                                     |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | SHARPE, KEITH A                 |                                                                                                                                                                                                                                                       | NAME                                      |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 5551 RIDGEWOOD DRIVE, SUITE 203 |                                                                                                                                                                                                                                                       | STREET ADDRESS                            |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | NAPLES, FL 34108                |                                                                                                                                                                                                                                                       | CITY-ST-ZIP<br>NAPLES, FL 34119           |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                 | <input type="checkbox"/> Delete                                                                                                                                                                                                                       | TITLE                                     |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                 |                                                                                                                                                                                                                                                       | NAME                                      |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                 |                                                                                                                                                                                                                                                       | STREET ADDRESS                            |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                 |                                                                                                                                                                                                                                                       | CITY-ST-ZIP                               |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                 | <input type="checkbox"/> Delete                                                                                                                                                                                                                       | TITLE                                     |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                 |                                                                                                                                                                                                                                                       | NAME                                      |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                 |                                                                                                                                                                                                                                                       | STREET ADDRESS                            |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                 |                                                                                                                                                                                                                                                       | CITY-ST-ZIP                               |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                 | <input type="checkbox"/> Delete                                                                                                                                                                                                                       | TITLE                                     |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                 |                                                                                                                                                                                                                                                       | NAME                                      |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                 |                                                                                                                                                                                                                                                       | STREET ADDRESS                            |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                 |                                                                                                                                                                                                                                                       | 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: <u><i>[Signature]</i></u> <b>April 07, 2005 (239) 263-1577</b><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |                                                                                                                                                                                                                                                       |                                           |