

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004394

FILED  
Apr 08, 2009  
Secretary of State

**Entity Name:** GRANDE PHOENICIAN AT THE GRANDE PRESERVE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

800 LAUREL OAK DR.  
300  
NAPLES, FL 34108

**New Principal Place of Business:**

**Current Mailing Address:**

3050 N. HORSESHOE DR.  
#275  
NAPLES, FL 34104

**New Mailing Address:**

**FEI Number:** 20-3282819

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KRAMER TRIAD MGT  
3050 N HORSESHOE DR #275  
NAPLES, FL 34101 US

**Name and Address of New Registered Agent:**

VANDALL, BONITA D  
3050 N HORSESHOE DR #275  
NAPLES, FL 34101 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: BONITA VANDALL

04/08/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: FEDT, STEVEN  
Address: 2765 INDIES WAY #503  
City-St-Zip: NAPLES, FL 34110

Title: D ( ) Delete  
Name: HALE, BARBARA  
Address: 275 INDIES WAY #503  
City-St-Zip: NAPLES, FL 34110

Title: S ( ) Delete  
Name: LECK, PAMELA  
Address: 275 INDIES WAY #PHOH  
City-St-Zip: NAPLES, FL 34110

Title: VP ( ) Delete  
Name: DELFUNSO, MIKE  
Address: 275 INDIES WAY #604  
City-St-Zip: NAPLES, FL 34110

Title: D ( ) Delete  
Name: SHARPE, KEITH  
Address: 5551 RIDGEWOOD DR STE 203  
City-St-Zip: NAPLES, FL 34108

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

Title: DP (X) Change ( ) Addition  
Name: LECK, PAMELA  
Address: 2765 INDIES WAY #PH4  
City-St-Zip: NAPLES, FL 34110

Title: DVPT (X) Change ( ) Addition  
Name: GERMAN, ROBERT  
Address: 275 INDIES WAY #401  
City-St-Zip: NAPLES, FL 34110

Title: DS (X) Change ( ) Addition  
Name: PERKOVICH, JOSEPH  
Address: 275 INDIES WAY #1703  
City-St-Zip: NAPLES, FL 34110

Title: DVP (X) Change ( ) Addition  
Name: FREY, GARY  
Address: 275 INDIES WAY #1401  
City-St-Zip: NAPLES, FL 34110

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: PAMELA LECK

PRES

04/08/2009

Electronic Signature of Signing Officer or Director

Date