

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Apr 30, 2009
Secretary of State**

DOCUMENT# N04000005314

Entity Name: GRANDVIEW OWNERS ASSOCIATION, INC.

Current Principal Place of Business:10719 FRONT BEACH RD
PANAMA CITY BEACH, FL 32407**New Principal Place of Business:****Current Mailing Address:**10719 FRONT BEACH RD
PANAMA CITY BEACH, FL 32407**New Mailing Address:**

FEI Number: 20-1249767

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:MILAM, DAVID
1414 CO. HWY 283 SOUTH, SUITE B
SANTA ROSA BEACH, FL 32459 US**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:**Title: VPD () Delete
Name: KRASZEWSKY, WALTER
Address: 53527 SHERWOOD LANE
City-St-Zip: SHELBY TOWNSHIP, MI 48315Title: D () Delete
Name: UTHMEIER, BILLY
Address: 402 BAY OAKS
City-St-Zip: DESTIN, FL 32541Title: PD () Delete
Name: MCCREADY, JIMMIE
Address: 1101 PROSPECT PROMENADE # 201
City-St-Zip: PANAMA CITY BEACH, FL 32413Title: SD () Delete
Name: ANSON, NANCY
Address: 508 NORTH AUDUBON
City-St-Zip: ALBANY, GA 31707Title: TD (X) Delete
Name: DI PIETRO, JOSEPH
Address: PO BOX 19758
City-St-Zip: PANAMA CITY BEACH, FL 32407**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: TD (X) Change () Addition
Name: UTHMEIER, BILLY
Address: 402 BAY OAKS
City-St-Zip: DESTIN, FL 32541Title: SD (X) Change () Addition
Name: MCCREADY, JIMMIE
Address: 1101 PROSPECT PROMENADE # 201
City-St-Zip: PANAMA CITY BEACH, FL 32413Title: PD (X) Change () Addition
Name: DI PIETRO, JOSEPH
Address: PO BOX 19758
City-St-Zip: PANAMA CITY BEACH, FL 32407 USTitle: () 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: MIKE GRIFFIN

Electronic Signature of Signing Officer or Director

MGR

04/30/2009

Date