2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 23, 2010
Secretary of State

DOCUMENT# N05000001850

Entity Name: MIRAMONTE AT GREY OAKS NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

%GULF BREEZE MGMT. SVCS. OF SW FL, LLC
8910 TERRENE COURT, SUITE 200
BONITA SPRINGS, FL 34135

New Principal Place of Business:

Current Mailing Address:

%GULF BREEZE MGMT. SVCS. OF SW FL, LLC
8910 TERRENE COURT, SUITE 200
BONITA SPRINGS, FL 34135

New Mailing Address:

FEI Number: 20-3073748 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COHEN & GRIGSBY, P.C.
27200 RIVERVIEW CENTER BLVD SUITE 309
BONITA SPRINGS, FL 34134 US

Name and Address of New Registered Agent:

SOLOMON, ANTHONY P
3185 HORSESHOE DRIVE SOUTH
NAPLES, FL 34104 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: ANTHONY P. SOLOMON 08/23/2010
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD
Name: SOLOMON, ANTHONY P
Address: 3185 HORSESHOE DRIVE SOUTH
City-St-Zip: NAPLES, FL 34104

Title: VPD
Name: TAYLOR, MARK S
Address: 3185 HORSESHOE DRIVE SOUTH
City-St-Zip: NAPLES, FL 34104

Title: STD
Name: WELKS, KAREN E
Address: 3185 HORSESHOE DRIVE SOUTH
City-St-Zip: NAPLES, FL 34104

I hereby 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 all other like empowered.

SIGNATURE: ANTHONY P. SOLOMON PRES 08/23/2010
Electronic Signature of Signing Officer or Director Date