

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2006 8:00 am
Secretary of State

02-28-2006 90009 042 ****61.25

DOCUMENT # N05000002462 1. Entity Name GRANT'S MILL PHASE II OWNERS ASSOCIATION, INC.					
Principal Place of business 1233 HUNTINGTON RIDGE RD. LYNN HAVEN, FL 32444			Mailing Address 1233 HUNTINGTON RIDGE RD. LYNN HAVEN, FL 32444		
2. Principal Place of Business 4403 Bayou Oaks Dr Suite, Apt. #, etc.		3. Mailing Address 4403 Bayou Oaks Dr Suite, Apt. #, etc.			
City & State Panama City FL Zip 32404 Country Bay		City & State Panama City FL Zip 32404 Country Bay		4. FEI Number 20-2091599	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent PUTMAN, RON 1233 HUNTINGTON RIDGE RD. LYNN HAVEN, FL 32444			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ (NOTE: Registered Agent signature required when reappointing)					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPST GREGORY, JEFFREY D. 3320 BRADENTON AVE. PANAMA CITY, FL 32405 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	PO Box 15414 Panama City FL 32404 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
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: <u>Jeffrey Gregory</u> 2-27-06 SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR					