


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2008 8:00 am
Secretary of State

04-17-2008 90026 036 ****61.25

DOCUMENT # N06000004530

1. Entity Name
GRANDVIEW ISLES TOWNHOMES OWNERS' ASSOCIATION, INC.



Principal Place of Business
**151 SOUTHHALL LANE SUITE 200
 MAITLAND, FL 32751**

Mailing Address
**151 SOUTHHALL LANE SUITE 200
 MAITLAND, FL 32751**

2. Principal Place of Business - No P.O. Box #
c/o World of Homes


3. Mailing Address
c/o World of Homes

Suite, Apt. #, etc.
2884 S. Osceola Ave

City & State
Orlando, FL

Zip
32806

Country
USA



01152008 Chg-NP CR2E037 (12/06)

4. FEI Number
20-4803142

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GRAHAM, JESSE E JR, ESQ
369 NORTH NEW YORK THIRD FLOOR
WINTER PARK, FL 32789

7. Name and Address of New Registered Agent

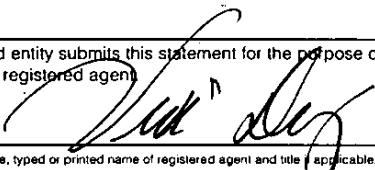
Name
Ferdinandson Enterprises, Inc.

Street Address (P.O. Box Number is Not Acceptable)
2884 S. Osceola Ave

City
Orlando

FL Zip Code
32806

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  **Vicki Diaz** **2-7-08**

(NOTE: Registered Agent signature required when reinstating.) DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to Florida Department of State

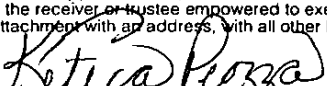
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CHYEDON, LYNN SHANNON 151 SOUTHHALL LANE SUITE 200 MAITLAND, FL 32751	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WHITE, JONATHAN 151 SOUTHHALL LANE SUITE 200 MAITLAND, FL 32751	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST WRIGHT, MATHEW 151 SOUTHHALL LANE SUITE 200 MAITLAND, FL 32751	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DAN DINJAK 151 SOUTH HALL LANE STE 200 MAITLAND, FL 32751	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KETICA PIAZZA 151 SOUTH HALL LANE STE 200 MAITLAND, FL 32751	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST MATTHEW WIKTED 151 South hall lane ste 200 MAITLAND, FL 32751	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:  **KETICA PIAZZA** **4/14/08** **407-599-0313 EXT 353**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #