## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08418

FILED Apr 23, 2009 Secretary of State

Entity Name: GRAND ISLAND RESORT HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

36019 CITRUS BLVD

GRAND ISLAND, FL 32735 US

Current Mailing Address: New Mailing Address:

36019 CITRUS BLVD

GRAND ISLAND, FL 32735 US

FEI Number: 59-2873391 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

COWIE, RAYMOND 13104 ORANGE AVE

GRAND ISLAND, FL 32735 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:

City-St-Zip:

City-St-Zip:

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

## **OFFICERS AND DIRECTORS:**

GRAND ISLAND, FL 32735

GRAND ISLAND, FL 32735 US

Title: PD () Delete Title: PD (X) Change () Addition
Name: KEIFER JR, EDWARD J Name: SIMON, SHARON
Address: 36211 CHERRY AVE Address: 13317 SEA BREEZE LN.
City St Zin: CRAND SELAND SEL 23735 LIS

City-St-Zip: GRAND ISLAND, FL 32735 City-St-Zip: GRAND ISLAND, FL 32735 US

Title: VPD () Delete Title: 1VPD (X) Change () Addition Name: HARRISON, ROBERT Name: FLEMING, TOM Address: 13228 LEMON AVE Address: 13215 ORANGE AVE

Title: 1VP ( ) Delete Title: 2VPD (X) Change ( ) Addition

Name:KELEMAN, BUCYANNName:MARTIN, CYNDIEAddress:13136 ORANGE AVEAddress:13040 ORANGE AVE

City-St-Zip: GRAND ISLAND, FL 32735 City-St-Zip: GRAND ISLAND, FL 32735 US

Title: SD () Delete Title: SD (X) Change () Addition Name: SIMON, SHARON Name: HARRISON, BOB

 Address:
 13317 SEA BREEZE LN
 Address:
 13228 LEMON AVE.

 City-St-Zip:
 GRAND ISLAND, FL 32735
 City-St-Zip:
 GRAND ISLAND, FL 32735 US

Title: TD ( ) Delete Title: TD (X) Change ( ) Addition

Name: MAXON, DONA Name: EKENSTEN, JIM
Address: 13152 ORANGE AVE. Address: 13053 ORANGE AVE.
City-St-Zip: GRAND ISLAND, FL 32735 City-St-Zip: GRAND ISLAND, FL 32735 US

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: SHARON SIMON PD 04/23/2009