

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

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**95 MAY -1 AM 9:22**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE

CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **N 28070 (3)**  
1. Corporation Name  
**Grand Bay At Oak Harbour Homeowner's Assoc.**

Principal Place of Business Mailing Address

3. Date Incorporated or Qualified **08-25-1988** 3a. Date of Last Report **02-12-94**  
4. FEI Number **65-0112282** Applied For  Not Applicable

2. Principal Place of Business 2a. Mailing Address

21 **Grand Bay At Oak Harbour** 26 **% Bristol Mgmt. Suc.**  
Suite, Apt. #, etc. Suite, Apt. #, etc.

22 **Oak Harbour Dr** 27 **103 S. US 1, F5-135**  
City & State City & State

23 **Juno Beach, FL** 28 **Jupiter, FL**  
Zip Country Zip Country

24 **33408** 25 **US** 29 **33477** 30 **US**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**  
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status  **\$68.75 Supplemental Fee Not Required**  
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

8. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

B1 Name **Steve Inglis**  
B2 Street Address (P.O. Box Number is Not Acceptable) **103 S. US 1, F5-135**  
B3  
B4 City **Jupiter, FL** B5 Zip Code **33477**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Steve Inglis* DATE **5/3/95**  
Signature must be typed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY ST ZIP

**PD Tom Luke 37 Grand Bay Circle Juno Beach, FL 33408**

**D Don Jordan 2 Grand Bay Circle Juno Beach, FL 33408**

**SD Fred Clarke 34 Grand Bay Circle Juno Beach, FL 33408**

**TR MARLENE SMITH 42 GRAND BAY CIRCLE JUNO BEACH FL 33408**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE  Change  Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY ST ZIP

21 TITLE  Change  Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY ST ZIP

31 TITLE  Change  Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY ST ZIP

41 TITLE  Change  Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY ST ZIP

51 TITLE  Change  Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY ST ZIP

61 TITLE  Change  Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY ST ZIP

**700001485581  
-05/12/95--01039--024  
\*\*\*\*130.00 \*\*\*\*130.00**

**T.S. 5/11/95**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption outlined in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Marlene Smith* DATE **4/9/95**  
SIGNATURE AND TYPED OR PRINTED NAME OF BOILING OFFICER OR DIRECTOR