


**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 26, 2005 8:00 am**  
**Secretary of State**

04-26-2005 90170 042 \*\*\*\*61.25

|   |                      |  |  |  |  |
|---|----------------------|--|--|--|--|
| <b>DOCUMENT # N28070</b>  |                      |  |  |   |  |
| 1. Entity Name<br>GRAND BAY AT OAK HARBOUR HOMEOWNER'S ASSOCIATION, INC.  |                      |  |  |  |  |
| Principal Place of Business<br>GRAND BAY AT OAK HARBOR<br>OAK HARBOUR DR.<br>JUNO BEACH, FL 33408   |                      |  | Mailing Address<br>400 TONEY PENNA DR<br>JUPITER, FL 33458 |  |  |
| 2. Principal Place of Business<br>c/o Dickinson Mgmt. Inc.  |                      | 3. Mailing Address<br>c/o Dickinson Mgmt. Inc.                                   |  |  |  |
| Suite, Apt. #, etc.<br>400 Toney Penna Dr.  |                      | Suite, Apt. #, etc.<br>400 Toney Penna Drive                                     |  |  |  |
| City & State<br>Jupiter, FL 33458   |                      | City & State<br>Jupiter, FL  |  | 4. FEI Number<br>65-0112282  |  |
| Zip<br>U.S.A.   |                      | Zip<br>33458   |  | Country<br>U.S.A.  |  |
| 6. Name and Address of Current Registered Agent<br>VAUGHN, DAVID<br>DICKINSON MANAGEMENT, INC.<br>400 TONEY PENNA<br>JUPITER, FL 33458  |                      |  |  | 7. Name and Address of New Registered Agent<br>Name Jennifer Miller<br>Street Address (P.O. Box Number is Not Acceptable)<br>c/o Dickinson Management, Inc.<br>400 Toney Penna Drive<br>City Jupiter FL Zip Code 33458 |  |
| 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 <i>Jennifer Miller, LCAM</i>  |                      | SIGNATURE <i>JENNIFER MILLER</i>   |  | DATE <i>3-8-05</i>   |  |
| Filing Fee is \$61.25 Due by May 1, 2005  |                      | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> |  | \$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   | PD                   | <input type="checkbox"/> Delete  | TITLE  | <input type="checkbox"/> Change  | <input type="checkbox"/> Addition            |
| NAME  | CUSUMANO, ROBERT     |  | NAME   |  |  |
| STREET ADDRESS  | 41 GRAND BAY CIRCLE  |  | STREET ADDRESS   |  |  |
| CITY-ST-ZIP   | JUNO BEACH, FL 33408 |  | CITY-ST-ZIP  |  |  |
| TITLE   | VPD                  | <input type="checkbox"/> Delete  | TITLE  | <input type="checkbox"/> Change  | <input type="checkbox"/> Addition            |
| NAME  | EKEY, RICHARD        |  | NAME   |  |  |
| STREET ADDRESS  | 5 GRAND BAY CIRCLE   |  | STREET ADDRESS   |  |  |
| CITY-ST-ZIP   | JUNO BEACH, FL 33408 |  | CITY-ST-ZIP  |  |  |
| TITLE   | SD                   | <input checked="" type="checkbox"/> Delete                                       | TITLE  | <input type="checkbox"/> Change  | <input type="checkbox"/> Addition            |
| NAME  | GALARDI, KATIE       |  | NAME   |  |  |
| STREET ADDRESS  | 19 GRAND BAY CIRCLE  |  | STREET ADDRESS   |  |  |
| CITY-ST-ZIP   | JUNO BEACH, FL 33408 |  | CITY-ST-ZIP  |  |  |
| TITLE   | TD                   | <input type="checkbox"/> Delete  | TITLE  | <input checked="" type="checkbox"/> Change   | <input type="checkbox"/> Addition            |
| NAME  | FERGUSON, GARY       |  | NAME   | Sec/Treas.<br>Gary Ferguson  |  |
| STREET ADDRESS  | 8 GRAND BAY CIRCLE   |  | STREET ADDRESS   | 8 Grand Bay Circle   |  |
| CITY-ST-ZIP   | JUNO BEACH, FL 33408 |  | CITY-ST-ZIP  | Juno Beach, FL 33408   |  |
| TITLE   | D                    | <input type="checkbox"/> Delete  | TITLE  | <input type="checkbox"/> Change  | <input checked="" type="checkbox"/> Addition |
| NAME  | JORDEN, RICHARD      |  | NAME   | D - John Callaghan   |  |
| STREET ADDRESS  | 3 GRAND BAY CIRCLE   |  | STREET ADDRESS   | 24 Grand Bay Circle  |  |
| CITY-ST-ZIP   | JUNO BEACH, FL 33408 |  | CITY-ST-ZIP  | Juno Beach, FL 33408   |  |
| TITLE   |                      | <input type="checkbox"/> Delete  | TITLE  | <input type="checkbox"/> Change  | <input type="checkbox"/> Addition            |
| NAME  |                      |  | NAME   |  |  |
| STREET ADDRESS  |                      |  | STREET ADDRESS   |  |  |
| CITY-ST-ZIP   |                      |  | CITY-ST-ZIP  |  |  |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>[Signature]</i>   |                      | SIGNATURE: <i>[Signature]</i>  |  | DATE: <i>3-8-05</i>  |  |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  |                      | SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR               |  | DATE   |  |

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