

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38461

FILED
May 01, 2010
Secretary of State

Entity Name: GRAND PRIX VILLAGE PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

A & G MANAGEMENT
11360 FORTUNE CIRCLE, E-6A
WELLINGTON, FL 33414

New Principal Place of Business:

C/O A & G MANAGEMENT
11360 FORTUNE CIRCLE, E-6A
WELLINGTON, FL 33414

Current Mailing Address:

A & G MANAGEMENT
11924 FOREST HILL BLVD., PMB 221, #22
WELLINGTON, FL 33414

New Mailing Address:

C/O A & G MANAGEMENT
11360 FORTUNE CIRCLE, SUITE E6A
WELLINGTON, FL 33414

FEI Number: 65-0256392 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

A & G MANAGEMENT SERVICES
A & G MANAGEMENT SERVICES
11924 FOREST HILL BLVD, # 22-221
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

A & G MANAGEMENT SERVICES
11360 FORTUNE CIRCLE
SUITE E6A
WELLINGTON, FL 33414 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: GEORGE PALERMO

05/01/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: DAMMERMAN, MARSHA
Address: 11360 FORTUNE CIRCLE, SUITE E6A
City-St-Zip: WELLINGTON, FL 33414

Title: DT
Name: VALLIERE, PAUL
Address: 11360 FORTUNE CIRCLE, SUITE E6A
City-St-Zip: WELLINGTON, FL 33414

Title: D
Name: BROSS, RODNEY
Address: 11360 FORTUNE CIRCLE, SUITE E6A
City-St-Zip: WELLINGTON, FL 33414

Title: DS
Name: MCGILL, HELENE
Address: 11360 FORTUNE CIRCLE, SUITE E6A
City-St-Zip: WEST PALM BEACH, FL 33414

Title: DVP
Name: ZIEGLER, CARLENE
Address: 11360 FORTUNE CIRCLE, SUITE E6A
City-St-Zip: WELLINGTON, FL 33414

Title: D
Name: NEWMAN, MARIA
Address: 11360 FORTUNE CIRCLE, SUITE E6A
City-St-Zip: WELLINGTON, FL 33414

I hereby 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 all other like empowered.

SIGNATURE: MARSHA DEMMERMAN

DP

05/01/2010

Electronic Signature of Signing Officer or Director

Date