2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41834

City-St-Zip:

JACKSONVILLE, FL 32258

FILED Apr 19, 2005 Secretary of State

Entity Name: GRAN MEADOWS OWNERS ASSOCIATION, INC.

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

BANNING MANAGEMENT INC.
6015 MORROW ST., STE. 211

JACKSONVILLE, FL 32217 US

BANNING MANAGEMENT INC.
6015 MORROW ST., STE. 107

JACKSONVILLE, FL 32217 US

Current Mailing Address: New Mailing Address:

BANNING MANAGEMENT, INC.

6015 MORROW ST., STE. 211

JACKSONVILLE, FL 32217 US

BANNING MANAGEMENT, INC.

6015 MORROW ST., STE. 107

JACKSONVILLE, FL 32217 US

FEI Number: 59-3063926 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:

BANNING, TERENCE K
6015 MORROW STREET E., SUITE 211
JACKSONVILLE, FL 32217 US
BANNING MANAGEMENT, INC.
6015 MORROW STREET E., SUITE 107
JACKSONVILLE, FL 32217 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: BANNING MANAGEMENT, INC. 04/19/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

City-St-Zip:

JACKSONVILLE, FL 32258

itle: VPD () Delete Title: VD (X) Change () Addition

Name:STAUDT, JUDYName:STEVENS, GERALDAddress:4403 GRAN MEADOWS NAddress:4396 ALLENWOODCity-St-Zip:JACKSONVILLE, FL 32258City-St-Zip:JACKSONVILLE, FL 32258

Title: DD () Delete Title: PD (X) Change () Addition

 Name:
 DANIEL, JEANETTE
 Name:
 PRESTON, JIM

 Address:
 4417 POPPY TREE LN
 Address:
 4392 POPPY TREE LANE

Title: PD () Delete Title: ST (X) Change () Addition Name: PRESTON, JAMES Name: CAREW, JIM

 Address:
 4392 POPPY TREE LANE
 Address:
 11892 GRAN MEADOWS WAY

 City-St-Zip:
 JACKSONVILLE, FL 32258
 City-St-Zip:
 JACKSONVILLE, FL 32258

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JIM PRESTON PD 04/19/2005