## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N43220

FILED Apr 12, 2006 Secretary of State

Entity Name: GRANDVIEW HEIGHTS CITIZENS ASSOCIATION INC.

**Current Principal Place of Business: New Principal Place of Business:** 730 PALM STREET WEST PALM BEACH, FL 33401 **Current Mailing Address: New Mailing Address:** 730 PALM STREET WEST PALM BEACH, FL 33401 FEI Number: 65-0273944 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: PETERSON, LOIS 730 PALM STREET WEST PALM BEACH, FL 33401 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition LITTLE, DANA Name: Name: 736 NEW YORK ST Address: Address: City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: Title: SD Title: TD (X) Change ( ) Addition ( ) Delete GIVENS, CRAIG Name: GIVENS, CRAIG Name: Address: 724 N. ST Address: 724 N. ST City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: WEST PALM BEACH, FL 33401 Title: () Delete Title: () Change () Addition LIPSCOMB, NORA Name: Name: Address: 733 NEW YORK Address: City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: Title: PD ( ) Delete Title: () Change () Addition Name: PETERSON, LOIS Name: Address: 730 PALM ST Address: City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: Title: DT () Delete Title: (X) Change ( ) Addition BOTHWELL, SHANNON RAPHAEL, CLEMENTE Name: Name: 715 NEW YORK ST 719 NEWARK ST. Address: Address: City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: WEST PALM BEACH, FL 33401 Title: () Delete Title: (X) Change ( ) Addition ROSE, RICK ROSE, RICK Name: Name: Address: 1608 LAKE AVE Address: 1608 LAKE AVE WEST PALM BEACH, FL 33401 WEST PALM BEACH, FL 33401 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LOIS PETERSON PRES 04/12/2006