

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT


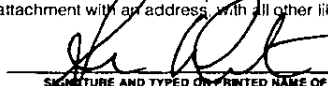
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Jul 20, 2005 8:00 am
Secretary of State

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07062005 Chg-NP CR2E037 (10/03)

DOCUMENT # N45489			
1. Entity Name GREYSTONE OWNERS' ASSOCIATION, INC.			
Principal Place of Business C/O KAREN JOY KLEIN 1058 GREYSTONE LANE SARASOTA, FL 34232 US		Mailing Address C/O KAREN JOY KLEIN 1058 GREYSTONE LANE SARASOTA, FL 34232 US	
2. Principal Place of Business 1037 Greystone Ln.		3. Mailing Address 1037 Greystone Ln.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State SARASOTA, FLA.		City & State SARASOTA, FLA.	
Zip 34232		Zip 34232	
Country SARASOTA		Country SARASOTA	
4. FEI Number 65-0316938		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent KLEIN, KAREN J 1058 GREYSTONE LANE SARASOTA, FL 34232		7. Name and Address of New Registered Agent Name: Gerri Detweiler Street Address (P.O. Box Number is Not Acceptable): 1037 GREYSTONE LANE City: SARASOTA FL 34232	
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: Gerri Detweiler DATE: 7/18/05			
Filing Fee is \$61.25 Due by September 7, 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: P NAME: KLEIN, KAREN STREET ADDRESS: 1058 GREYSTONE LANE CITY-ST-ZIP: SARASOTA, FL	<input checked="" type="checkbox"/> Delete	TITLE: PRESIDENT NAME: PONZO, MICHAEL STREET ADDRESS: 1013 GREYSTONE LANE CITY-ST-ZIP: SARASOTA, FLA. 34232	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: VT NAME: HALT, WAYNE STREET ADDRESS: 1072 GREYSTONE LN CITY-ST-ZIP: SARASOTA, FL 34232	<input checked="" type="checkbox"/> Delete	TITLE: VICE-PRESIDENT, TREASURER NAME: CROSS, AUBREY E. STREET ADDRESS: 1075 GREYSTONE LANE CITY-ST-ZIP: SARASOTA, FLA. 34232	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: S NAME: WEINSTEIN, SARAH STREET ADDRESS: 1084 GREYSTONE LN CITY-ST-ZIP: SARASOTA, FL 34232	<input checked="" type="checkbox"/> Delete	TITLE: SECRETARY NAME: DETWEILER, Gerri STREET ADDRESS: 1037 GREYSTONE LANE CITY-ST-ZIP: SARASOTA, FLA. 34232	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: D NAME: CROSS, JESSI STREET ADDRESS: 1075 GREYSTONE LANE CITY-ST-ZIP: SARASOTA, FL 34232	<input checked="" type="checkbox"/> Delete	TITLE: DIRECTOR NAME: DAWLEY, AL STREET ADDRESS: 1060 GREYSTONE LANE CITY-ST-ZIP: SARASOTA, FLA. 34232	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: P NAME: KLEIN, KAREN STREET ADDRESS: 1058 GREYSTONE LANE CITY-ST-ZIP: SARASOTA, FL 34232	<input checked="" type="checkbox"/> Delete	TITLE: DIRECTOR NAME: YATES, NANCY STREET ADDRESS: 1049 GREYSTONE LANE CITY-ST-ZIP: SARASOTA, FLA. 34232	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D NAME: REXACH, LUIS STREET ADDRESS: 1022 GREYSTONE LN CITY-ST-ZIP: SARASOTA, FL 34232	<input checked="" type="checkbox"/> Delete	NONE	
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: 		7/18/05 941-379-0456	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	