2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2006
Secretary of State

DOCUMENT# N46286

Entity Name: GREENBRIER LAKE CONDOMINIUM ASSOCIATION INC.

Current Principal Place of Business:

7400 SPRING HILL DR.
#111
SPRING HILL, FL 34606

New Principal Place of Business:

Current Mailing Address:

7400 SPRING HILL DR.
#111
SPRING HILL, FL 34606

New Mailing Address:

FEI Number: 59-2110243 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DEBRA D FORBES
7400 SPRING HILL DRIVE
UNIT 119
SPRING HILL, FL 34606 US

Name and Address of New Registered Agent:

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:

Title:	PD	( ) Delete
Name:	TORNABENE, CHARLES	
Address:	7400 SPRING HILL DR., #219	
City-St-Zip:	SPRING HILL, FL 34606	
Title:	VPD	( ) Delete
Name:	LAVELLE, MARY	
Address:	7400 SPRINGHILL DR., #215	
City-St-Zip:	SPRING HILL, FL 34606	
Title:	SD	( ) Delete
Name:	WALKER, JUDITH	
Address:	7400 SPRING HILL DR., #118	
City-St-Zip:	SPRING HILL, FL 34606	
Title:	ASD	( ) Delete
Name:	SANFORD, MARIA	
Address:	7400 SPRING HILL DR #116	
City-St-Zip:	SPRING HILL, FL 34606	
Title:	TD	( ) Delete
Name:	FORBES, DEBRA D	
Address:	7400 SPRING HILL DR., #119	
City-St-Zip:	SPRING HILL, FL 34606	
Title:	D	( ) Delete
Name:	FORBES, RONALD G	
Address:	7400 SPRING HILL DR., #119	
City-St-Zip:	SPRING HILL, FL 34606	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	SD	(X) Change ( ) Addition
Name:	SANFORD, MARIA	
Address:	7400 SPRING HILL DR., #217	
City-St-Zip:	SPRING HILL, FL 34606	
Title:	ASD	(X) Change ( ) Addition
Name:	MAURER, NINA	
Address:	7400 SPRING HILL DR., #218	
City-St-Zip:	SPRING HILL, FL 34606	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
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: DEBRA D. FORBES TD 02/07/2006

Electronic Signature of Signing Officer or Director — Date