
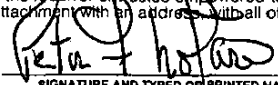


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2006 8:00 am
Secretary of State

05-04-2006 90205 040 ****61.25

DOCUMENT # N47220 1. Entity Name NEWPORT ISLAND AT GRAND HARBOR CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 100 VISTA ROYALE BLVD VERO BEACH, FL 32962 US			Mailing Address 100 VISTA ROYALE BLVD VERO BEACH, FL 32962 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CORNETT, GOOGE & ASSOC. 401 EAST OSCEOLA STREET 1ST FLOOR STUART, FL 34994			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2006		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	SD	<input checked="" type="checkbox"/> Delete	TITLE	PD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	CHATELLIER, CAMERON		NAME	PETER NOTARO	
STREET ADDRESS	100 VISTA ROYALE BLVD		STREET ADDRESS	100 VISTA ROYALE BLVD	
CITY-ST-ZIP	VERO BEACH, FL 32962		CITY-ST-ZIP	VERO BEACH, FL 32962	
TITLE	TR	<input type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	RIDGE, GAWIN		NAME	JOHN BRUNNER	
STREET ADDRESS	100 VISTA ROYALE BLVD		STREET ADDRESS	100 VISTA ROYALE BLVD	
CITY-ST-ZIP	VERO BEACH, FL 32962		CITY-ST-ZIP	VERO BEACH, FL 32962	
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ERNST, RICHARD		NAME		
STREET ADDRESS	100 VISTA ROYALE BLVD		STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH, FL 32962		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CORTISSOZ, JOHN		NAME		
STREET ADDRESS	100 VISTA ROYALE BLVD		STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH, FL 32962		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HOGAN, JOHN III		NAME		
STREET ADDRESS	100 VISTA ROYALE BLVD		STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH, FL 32962		CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 			Peter F Notaro		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date: 5/01/06		