

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47422

FILED  
Feb 23, 2009  
Secretary of State

Entity Name: GRANVILLE CONDOMINIUM J ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O CASTLE MANAGEMENT INC  
12270 SW 3RD STREET  
PLANTATION, FL 33325 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O CASTLE MANAGEMENT INC  
P.O. BOX 559009  
FORT LAUDERDALE, FL 33325 US

**New Mailing Address:**

FEI Number: 65-0322240      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KATZMAN GARFINKEL, P.A.  
1501 N.W. 49TH ST.  
SUITE 202  
FT. LAUDERDALE, FL 33309 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: BRODER, LEN  
Address: 7365 GRANVILLE DR.  
City-St-Zip: TAMARAC, FL

Title: VD ( ) Delete  
Name: BLATTMAN, LEONARD  
Address: 7377 GRANVILLE DR  
City-St-Zip: TAMARAC, FL

Title: SD ( ) Delete  
Name: COLEN, HOWARD  
Address: 7369 GRANVILLE DR  
City-St-Zip: TAMARAC, FL 33321

Title: TD ( ) Delete  
Name: SAPERSTEIN, JERRY  
Address: 7313 GRANVILLE DR  
City-St-Zip: TAMARAC, FL 33321

Title: VPD ( ) Delete  
Name: GABAY, IKE  
Address: 7319 GRANVILLE DR  
City-St-Zip: TAMARAC, FL 33321

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: 1VP (X) Change ( ) Addition  
Name: BLATTMAN, LEONARD  
Address: 7377 GRANVILLE DR  
City-St-Zip: TAMARAC, FL

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: 2VP (X) Change ( ) Addition  
Name: GABAY, IKE  
Address: 7319 GRANVILLE DR  
City-St-Zip: TAMARAC, FL 33321

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT A. DONNELLY

MGR

02/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date