

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48161

FILED  
Feb 10, 2012  
Secretary of State

**Entity Name:** GRANVILLE NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O CASTLE GROUP  
12270 SW 3RD ST  
PLANTATION, FL 33325 US

**New Principal Place of Business:**

C/O CONSOLIDATED COMMUNITY MANAGEMENT  
7124 N. NOB HILL ROAD  
TAMARAC, FL 33321 US

**Current Mailing Address:**

C/O CASTLE GROUP  
P.O. BOX 559009  
FORT LAUDERDALE, FL 33355

**New Mailing Address:**

C/O CONSOLIDATED COMMUNITY MANAGEMENT  
7124 N. NOB HILL ROAD  
TAMARAC, FL 33321

**FEI Number:** 65-0337206

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHAPNICK, MICHAEL ESQ.  
100 EAST LINTON BLVD  
SUITE 502B  
TAMARAC, FL 33483 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  
Name: ROTH, EUGENE  
Address: 7695 GRANVILLE DR.  
City-St-Zip: TAMARAC, FL 33321

Title: 2VP  
Name: BRODER, LEN  
Address: 7365 GRANVILLE DRIVE  
City-St-Zip: TAMARAC, FL 33321

Title: SD  
Name: GROSS, LORRAINE  
Address: 7492 GRANVILLE DR  
City-St-Zip: TAMARAC, FL 33321

Title: 1VP  
Name: KARPE, STEVE  
Address: 7415 GRANVILLE DR  
City-St-Zip: TAMARAC, FL 33321

Title: TD  
Name: BRAUN, HANNS  
Address: 7547 GRANVILLE DRIVE  
City-St-Zip: TAMARAC, FL 33321

Title: D  
Name: SCHNEIDER, ED  
Address: 7893 GRANVILLE DRIVE  
City-St-Zip: TAMARAC, FL 33321

I hereby 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 all other like empowered.

SIGNATURE: EUGENE ROTH

PRES

02/10/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date