2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004551

FILED Feb 23, 2009 Secretary of State

Entity Name: GRANVILLE CONDOMINIUM H ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: C/O CASTLE GROUP 12270 SW 3RD STREET, STE. 200 PLANTATION, FL 33325 **New Mailing Address: Current Mailing Address:** C/O CASTLE GROUP P.O. BOX 559009 FORT LAUDERDALE, FL 33355 US FEI Number: 65-0439800 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GROSS, LORRAINE 7492 GRANVILLE DRIVE TAMARAC, FL 33321 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete ELLENTHAL, BARBARA ELLENTHAL, BARBARA Name: Name: 7486 GRANVILLE DR. Address: 7486 GRANVILLE DR. Address: TAMARAC, FL 33321 City-St-Zip: TAMARAC, FL 33321 City-St-Zip: Title: PD () Delete Title: () Change () Addition GROSS, LORRAINE Name: Name: Address: 7492 GRANVILLE DR. Address: City-St-Zip: TAMARAC, FL 33321 City-St-Zip: Title: () Delete Title: 1VP (X) Change () Addition FREEDMAN, JOY EDELSON, ELLIOT Name: Name: 7456 GRANVILLE DR 7446 GRANVILLE DR Address: Address: City-St-Zip: TAMARAC, FL 33321 City-St-Zip: TAMARAC, FL 33321 Title: VPD () Delete Title: 2VP (X) Change () Addition Name: SONENSHEIN, BERNARD Name: BAUMGARTEN, RON 7440 GRANVILLE DR. 7408 GRANVILLE DR. Address: Address: City-St-Zip: TAMARAC, FL 33321 City-St-Zip: TAMARAC, FL 33321 Title: () Delete Title: () Change (X) Addition DRUBYCH, ROBERT Name: Name: 7478 GRANVILLE DRIVE Address: Address: City-St-Zip: 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