2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005452

FILED Apr 15, 2005 Secretary of State

Entity Name: GRAND POINTE DEVELOPMENT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4750 N 9TH AVE 6704-C PLANTATION ROAD PENSACOLA, FL 32503 PENSACOLA, FL 32504

Current Mailing Address: New Mailing Address:

4750 N 9TH AVE 6704-C PLANTATION ROAD PENSACOLA, FL 32503 PENSACOLA, FL 32504

FEI Number: 59-3289757 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:

ALL SAINTS REAL ESTATE INC.
4750 N 9TH AVE
PENSACOLA, FL 32503 US

ALL SAINTS REAL ESTATE INC.
6704-C PLANTATION ROAD
PENSACOLA, FL 32504 US

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: PAMELA A KEEN 04/15/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: D (X) Change () Addition Name: RAPPOLD, KATHY Name: RAPPOLD, KATHY

 Address:
 2500 ABBIE ELIZABETH CT
 Address:
 2500 ABBIE ELIZABETH CT

 City-St-Zip:
 GULF BREEZE, FL 32563
 City-St-Zip:
 GULF BREEZE, FL 32563

Title: D () Delete Title: D (X) Change () Addition Name: THOMAS, JOHN Name: COYL, PATRICIA

Address: 1177 MARY LOU LANE Address: 1191 GRAND POINTE DRIVE
City-St-Zip: GULF BREEZE, FL 32563 City-St-Zip: GULF BREEZE, FL 32563

Title: SD () Delete Title: PD (X) Change () Addition Name: HANDLER, MIKE Name: HANDLER, MIKE

Address: 1195 GRAND POINTE DR Address: 1195 GRAND POINTE DR City-St-Zip: GULF BREEZE, FL 32563 City-St-Zip: GULF BREEZE, FL 32563

Title: D () Delete Title: D (X) Change () Addition Name: BRUMFIELD, DWANE Name: SILVER, RUSSELL

Address: 1168 KELTON BLVD Address: 1194 GRAND POINTE DRIVE
City-St-Zip: GULF BREEZE, FL 32563 City-St-Zip: GULF BREEZE, FL 32563

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 SKELTON, MARK

 Address:
 Address:
 1152 MARY KATE DRIVE

 City-St-Zip:
 City-St-Zip:
 GULF BREEZE, FL 32563

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MIKE HANDLER PD 04/15/2005