

FILED
Feb 27, 1999 8:00 am
Secretary of State

02-27-1999 90092 011 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Margis Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N95000001712

1. Corporation Name
GRANVILLE CONDOMINIUM C ASSOCIATION, INC.

Principal Place of Business 7600 NOB HILL ROAD TAMARAC FL 33321	Mailing Address 200 N.W. 107TH AVENUE SUITE 301 MIAMI FL 33172 POMPANO BEACH, FL 33069
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3 7 2080-90029-8



2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date incorporated or Qualified 04/11/1995	4. FEI Number NOT APPLICABLE Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

8. Name and Address of Current Registered Agent WATSKY, MORRIS J 700 N.W. 107TH AVENUE MIAMI FL 33172	10. Name and Address of New Registered Agent 91 Name EXCLUSIVE PROPERTY MGT INC. 92 Street Address (P.O. Box Number is Not Acceptable) 1280 S.W. 36 AVENUE SUITE 301 93 94 City POMPADNO BEACH FL 95 Zip Code 33069
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11. Pursuant to the provisions of Sections 617.502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept, the obligations of Section 617.0503, Florida Statutes.

SIGNATURE *Paul J. Sapita* PAUL J. SAPITA, MANAGER DATE 4/12/99

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PO	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	PRESIDENT P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RIEFS, MARTIN L		1.2 NAME	DAVID FORMAN	
STREET ADDRESS	7600 NOB HILL ROAD		1.3 STREET ADDRESS	7780 GRANVILLE DR.	
CITY-ST-ZIP	TAMARAC FL 33321		1.4 CITY-ST-ZIP	TAMARAC, FLA. 33321	
TITLE	VO	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	VICE-PRESIDENT VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHRAGER, MARLENE		2.2 NAME	HAROLD COHEN	
STREET ADDRESS	7600 NOB HILL ROAD		2.3 STREET ADDRESS	7704 GRANVILLE DR.	
CITY-ST-ZIP	TAMARAC FL 33321		2.4 CITY-ST-ZIP	TAMARAC, FLA 33321	
TITLE	STD	<input checked="" type="checkbox"/> DELETE	3.1 TITLE	SECRETARY-TREASURER	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PEDONE, SUE		3.2 NAME	EVELYN KLIGMAN	
STREET ADDRESS	7600 NOB HILL ROAD		3.3 STREET ADDRESS	7768 GRANVILLE DR.	
CITY-ST-ZIP	TAMARAC FL 33321		3.4 CITY-ST-ZIP	TAMARAC, FLA 33321	
TITLE		<input type="checkbox"/> DELETE	4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (11/98)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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; that the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *WATSKY* DATE: 1/29/99