


FILED
Jun 16, 1999 8:00 am
Secretary of State

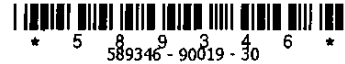
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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N97000003445

1. Corporation Name
GRAND BAY/LBK III ASSOCIATION, INC.

Principal Place of Business 3033 GRAND BAY BLVD. LONGBOAT KEY FL 34228	Mailing Address 3033 GRAND BAY BLVD. LONGBOAT KEY FL 34228
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21. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country	2a. Mailing Address 26. 3030 GRAND BAY BLVD Suite, Apt. #, etc. 27. City & State 28. Zip Country	3. Date Incorporated or Qualified 06/13/1997	4. FEI Number 65-0813533	Applied For <input type="checkbox"/> Not Applicable
23. Certificate of Status Desired <input type="checkbox"/>	24. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$8.75 Additional Fee Required \$5.00 May Be Added to Fees		

9. Name and Address of Current Registered Agent SEIDER, WILLIAM E WILLIAMS, PARKER, HARRISON, DIETZ & GETZEN 200 S ORANGE AVE SARASOTA FL 34236	10. Name and Address of New Registered Agent 81. Name PITCHFORD, MALCOLM 82. Street Address (P.O. Box Number is Not Acceptable) BARNETT BANK CENTER 83. 240 SOUTH PINEAPPLE AVENUE 84. City SARASOTA FL 85. Zip Code 34230
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11. Pursuant to the provisions of Sections 617.0502 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: *[Signature]* DATE: **7/1/99**
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP PASKOW, ROY G. 3033 GRAND BAY BLVD. LONGBOAT KEY FL 34228 <input checked="" type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	DP RONALD JECHA 3030 GRAND BAY BLVD UNIT 356 LONGBOAT KEY, FL 34228 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST GRANATH, JOHN 3033 GRAND BAY BLVD. LONGBOAT KEY FL 34228 <input checked="" type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	DV DAVID FLATOW 3030 GRAND BAY BLVD UNIT 351 LONGBOAT KEY, FL 34228 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV ROMANOWSKI, JOSEPH 3033 GRAND BAY BLVD. LONGBOAT KEY FL 34228 <input checked="" type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	DS/T EDWARD GANSEN 3030 GRAND BAY BLVD UNIT 372 LONGBOAT KEY, FL 34228 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	D DANIEL IDZIK 3030 GRAND BAY BLVD UNIT 393 LONGBOAT KEY, FL 34228 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	D DIANA VERMA 3030 GRAND BAY BLVD UNIT 383 LONGBOAT KEY, FL 34228 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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, a member 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: *[Signature]* DATE: **3/26/99**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **EDWARD GANSEN**
Daytime Phone #

CR2E037 (1/98)