## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000003511

FILED Apr 27, 2009 Secretary of State

Entity Name: GRAND LAKE RESORT CONDOMINIUM ASSOCIATION, INC.

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

7770 WEST IRLO BRONSON MEMORIAL HWY. KISSIMMEE, FL 34747

Current Mailing Address: New Mailing Address:

PO BOX 730119 ORMOND BEACH, FL 32173

FEI Number: 59-3478546 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:

KENNEDY, R. MICHAEL

444 SPABREEZE BOULEVARD

SUITE 1001

DAYTONA BEACH, FL 32118 US

KENNEDY, R. MICHAEL

3 SUNSHINE BLVD

ORMOND BEACH, FL 32174 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: 04/27/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TS ()Delete Title: ()Change ()Addition

 Name:
 PARENT, KEITH
 Name:

 Address:
 16461 RACQUET CLUB ROAD
 Address:

 City-St-Zip:
 WESTON, FL 33326
 City-St-Zip:

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

Name: HINDERMAN, GARTH Name: RUSSMAN, LINDA

Address: 2757 E LAKESHORE DR Address: PO 1081

City-St-Zip: BIRCHWOOD, WI 54817 City-St-Zip: NEW MARKET, VA 22044

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

 Name:
 GARDNER, KAY D
 Name:
 GARDNER, KAY D

 Address:
 190-23 PINEVILLE LANE
 Address:
 190-23 PINEVILLE LANE

City-St-Zip: FRANKVILLE GARDENS, NY 114131536 City-St-Zip: FRANKVILLE GARDENS, NY 11413

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: KEITH PARENT TS 04/27/2009