

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005467

FILED  
Apr 29, 2006  
Secretary of State

**Entity Name:** FLORIDA GRAND BANKS/EASTBAY OWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

% HAL JONES & CO  
1900 SE 15TH STREET  
FT. LAUDERDALE, FL 33316

**New Principal Place of Business:**

**Current Mailing Address:**

% HAL JONES & CO  
1900 SE 15TH STREET  
FT. LAUDERDALE, FL 33316

**New Mailing Address:**

**FEI Number:** 65-0948054

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

JONES, HAROLD M III  
% HAL JONES & CO  
1900 SE 15TH STREET  
FT. LAUDERDALE, FL 33316 US

**Name and Address of New Registered Agent:**

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:**

Title: D ( ) Delete  
Name: JONES, HAROLD M III  
Address: % HAL JONES & CO., 1900 SE 15TH STREET  
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: D ( ) Delete  
Name: HOLZKAMP, BOB  
Address: 650 ISLE OF PALM DRIVE  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: D ( ) Delete  
Name: WALLY, NASET  
Address: 20717 6TH AVE.  
City-St-Zip: SUMMERLAND KEY, FL 33042

Title: D ( ) Delete  
Name: SMITH, BOB  
Address: 431 KENMORE AVENUE  
City-St-Zip: KILMARNOCK, VA 22482

Title: D ( ) Delete  
Name: SHULMAN, BOB  
Address: 5605 HAMMOCK LANE  
City-St-Zip: LAUDERHILL, FL 33319

Title: D ( ) Delete  
Name: STEVENS, AL  
Address: 1542 STICKNEY POINT RD.  
City-St-Zip: SARASOTA, FL 34231

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: HOLZKAMP, BOB  
Address: 2845 MARINA CIRCLE  
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: D/P (X) Change ( ) Addition  
Name: WALLY, NASET  
Address: 20717 6TH AVE.  
City-St-Zip: SUMMERLAND KEY, FL 33042

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JAY JONES

D

04/29/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date