

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 30, 2006 08:00 AM
Secretary of State**

DOCUMENT # P96000037678

1. Entity Name
GRAND SEAS A, INC.



Principal Place of Business
**100 EAST GRANADA BLVD.
ORMOND BEACH, FL 32176 US**

Mailing Address
**100 EAST GRANADA BLVD.
ORMOND BEACH, FL 32176 US**



01312006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3389340

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**VAUGHN, KATHY
110 EAST GRANADA BLVD
SUITE 104
MELBOURNE, FL 32901**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

**U000000407624
02/08/06-80028-006 150.00**

10. OFFICERS AND DIRECTORS

TITLE	VTD
NAME	COLTELLI, LARRY
STREET ADDRESS	100 E. GRANADA BLVD.
CITY-ST-ZIP	ORMOND BEACH, FL 32176

TITLE	PSD
NAME	SCHLOSSBERG, STEVE
STREET ADDRESS	100 E. GRANADA BLVD.
CITY-ST-ZIP	ORMOND BEACH, FL 32176

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **STEVE SCHLOSSBERG** **1-31-06 386-257-2026**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #