

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N39466

**FILED  
Apr 10, 2019  
Secretary of State  
4870213130CC**

**Entity Name:** GRANVILLE CONDOMINIUM A ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O CAMPBELL PROPERTY MANAGEMENT  
7598 GRANVILLE DRIVE  
TAMARAC, FL 33321

**Current Mailing Address:**

C/O CAMPBELL PROPERTY MANAGEMENT  
7598 GRANVILLE DRIVE  
TAMARAC, FL 33321 US

**FEI Number:** 65-0685391

**Certificate of Status Desired:** No

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

CHAPNICK COMMUNITY ASSOCIATION LAW, P.A.  
1655 PALM BEACH LAKES BLVD  
SUITE 500  
WEST PALM BEACH, FL 33401 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SCHILLER, LORI  
Address        C/O CAMPBELL PROPERTY  
                  MANAGEMENT  
                  8010 N UNIVERSITY DR  
City-State-Zip: TAMARAC FL 33321

Title            TREASURER  
Name            SAXE, RALPH  
Address        C/O CAMPBELL PROPERTY  
                  MANAGEMENT  
                  8010 N UNIVERSITY DR FIRST FLOOR  
City-State-Zip: TAMARAC FL 33321

Title            VP  
Name            KRAMEISEN, NORMAN  
Address        C/O CAMPBELL PROPERTY  
                  MANAGEMENT  
                  8010 N UNIVERSITY DR  
City-State-Zip: TAMARAC FL 33321

Title            SECRETARY  
Name            SUMMERS, VICKI  
Address        C/O CAMPBELL PROPERTY  
                  MANAGEMENT  
                  8010 N UNIVERSITY DR FIRST FLOOR  
City-State-Zip: TAMARAC FL 33321

Title            VP, 2  
Name            MCGILL, ALAN  
Address        C/O CAMPBELL PROPERTY MGMT  
                  8010 N UNIVERSITY DRIVE FIRST  
                  FLOOR  
City-State-Zip: TAMARAC FL 33321

*I hereby 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 all other like empowered.*

**SIGNATURE:** LORI SCHILLER

**PRESIDENT**

**04/10/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date