

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000001712

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

**FILED**  
**Mar 20, 2013**  
**Secretary of State**  
**CC0664643270**

**Current Principal Place of Business:**

C/O CONSOLIDATED COMMUNITY MANAGEMENT  
7124 N. NOB HILL ROAD  
TAMARAC, FL 33321

**Current Mailing Address:**

C/O CONSOLIDATED COMMUNITY MANAGEMENT  
7124 N. NOB HILL ROAD  
TAMARAC, FL 33321

**FEI Number: 65-0813361**

**Certificate of Status Desired: No**

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

MARTIN & BENNIS, P.A.  
319 SE 14TH STREET  
FORT LAUDERDALE, FL 33316 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: RANDY BENNIS**

**03/20/2013**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title 1VP  
Name LEE, PATRICIA  
Address 7124 N. NOB HILL ROAD  
City-State-Zip: TAMARAC FL 33321

Title P  
Name AUDI, BARBARA  
Address 7124 N. NOB HILL ROAD  
City-State-Zip: TAMARAC FL 33321

Title SECRETARY  
Name ALMAS, MARVIN  
Address 7124 N. NOB HILL ROAD  
City-State-Zip: TAMARAC FL 33321

Title TREASURER  
Name FARKAS, HARRIET  
Address 7124 N. NOB HILL ROAD  
City-State-Zip: TAMARAC FL 33321

Title 2VP  
Name GROSKY, GEOFFREY  
Address 7124 N. NOB HILL ROAD  
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: BARBARA AUDI**

**PRESIDENT**

**03/20/2013**

Electronic Signature of Signing Officer/Director Detail

Date