

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746216

FILED
Mar 05, 2009
Secretary of State

Entity Name: GROVE VILLAS WEST HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

13250 SW 135 AVE
MIAMI, FL 33186 US

New Principal Place of Business:

Current Mailing Address:

13250 SW 135 AVE
MIAMI, FL 33186 US

New Mailing Address:

FEI Number: 59-2121568

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MOTYCZKA, WILLIAM
13410 SW 128 STREET
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

SRLD
201 ALHAMBRA CIRCLE
SUITE 1102
CORAL GABLES, FL 33134 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: LISA LERNER

03/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: ST () Delete
Name: CASTRO, CLARA
Address: 8100 SW 153 PLACE
City-St-Zip: MIAMI, FL 33193

Title: PD () Delete
Name: CARVAJAL, RAY
Address: 15333 SW 80 LANE
City-St-Zip: MIAMI, FL 33193

Title: NPD () Delete
Name: PEREZ, JOAQUIN
Address: 8156 SW 153 CT
City-St-Zip: MIAMI, FL 33193

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VPD (X) Change () Addition
Name: PEREZ, JOAQUIN
Address: 8156 SW 153 CT
City-St-Zip: MIAMI, FL 33193

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: REINALDO CARVAJAL

P

03/05/2009

Electronic Signature of Signing Officer or Director

Date