

DOCUMENT # 757056

1. Entity Name

MAISON GROVE ASSOCIATION, INC.

FILED
May 02, 2000 8:00 am
Secretary of State

05-02-2000 90062 019 ****61.25



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

~~DAVID K. TUCKER~~
3221 MARY STREET
COCONUT GROVE FL 33133

PO BOX 331821
COCONUT GROVE FL 33233-1821

2. Principal Place of Business

3. Mailing Address

3245 MARY ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

COCONUT GROVE, FL

City & State

4. FEI Number

59-2358315

Applied For

Not Applicable

Zip

33133

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MJF REGISTERED AGENT CORP
153 SEVILLA AVENUE
CORAL GABLES FL 33134

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: D Delete
NAME: TUCKER, DAVID K
STREET ADDRESS: 3221 MARY STREET
CITY-ST-ZIP: CORAL GABLES FL 33133

TITLE: Change Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
 Change Addition

TITLE: D Delete
NAME: BURGE, THOMAS R
STREET ADDRESS: 3245 MARY STREET
CITY-ST-ZIP: CORAL GABLES FL 33133

TITLE: PRES / DIRECTOR Change Addition
NAME: BURGE, R THOMAS
STREET ADDRESS: 3245 MARY ST
CITY-ST-ZIP: COCONUT GROVE, FL 33133

TITLE: S Delete
NAME: ZELL, GREGORY T
STREET ADDRESS: 3231 MARY STREET
CITY-ST-ZIP: CORAL GABLES FL 33133

TITLE: SEC / DIRECTOR Change Addition
NAME: ZELL, GREGORY T
STREET ADDRESS: 3231 MARY ST.
CITY-ST-ZIP: COCONUT GROVE, FL 33133

TITLE: TD Delete
NAME: THORENSEN, ERLING T
STREET ADDRESS: 3235 MARY ST
CITY-ST-ZIP: COCONUT GROVE FL 33133

TITLE: Change Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
 Change Addition

TITLE: PD Delete
NAME: SPRINTIS, DAVID D
STREET ADDRESS: 3243 MARY ST
CITY-ST-ZIP: COCONUT GROVE FL 33133

TITLE: DIRECTOR Change Addition
NAME: BELLAS, PETER
STREET ADDRESS: 3225 MARY ST
CITY-ST-ZIP: COCONUT GROVE, FL 33133

TITLE: VPD Delete
NAME: FREEMAN, MICHAEL J
STREET ADDRESS: 153 SEVILLA AVE
CITY-ST-ZIP: CORAL GABLES FL 33134

TITLE: Change Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
 Change Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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:

Erling T. Thoresen
ERLING T. THORENSEN

4/24/00
Date

305 447.8667
Daytime Phone #

CR2E037 (9/99)