
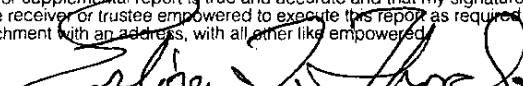


**2004 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT (AR)**

**FILED**  
**Apr 26, 2004 8:00 am**  
**Secretary of State**

04-26-2004 91285 011 \*\*\*\*61.25

<b>DOCUMENT # 757056</b>					
1. Entity Name <b>MAISON GROVE ASSOCIATION, INC.</b>					
Principal Place of Business <b>3245 MARY ST COCONUT GROVE FL 33133</b>			Mailing Address <b>PO BOX 331821 COCONUT GROVE FL 33233-1821</b>		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number <b>59-2358315</b>	
				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>MJF REGISTERED AGENT CORP 153 SEVILLA AVENUE CORAL GABLES FL 33134</b>			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			<b>FL</b> 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
				<b>Make Check Payable to Florida Department of State</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	SD	<input type="checkbox"/> Delete	TITLE	<i>Correction</i>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUSSELL, ENDEAN		NAME	<b>ENDEAN, RUSSELL</b>	
STREET ADDRESS	3233 MARY ST.		STREET ADDRESS		
CITY-ST-ZIP	COCONUT GROVE FL 33133		CITY-ST-ZIP		
TITLE	PD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZELL, GREGORY T		NAME		
STREET ADDRESS	3231 MARY STREET.		STREET ADDRESS		
CITY-ST-ZIP	COCONUT GROVE FL 33133		CITY-ST-ZIP		
TITLE	TD	<input type="checkbox"/> Delete	TITLE	<b>T (only)</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THORESEN, ERLING T		NAME		
STREET ADDRESS	3235 MARY ST		STREET ADDRESS		
CITY-ST-ZIP	COCONUT GROVE FL 33133		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	<b>VP</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SPRINTIS, DAVID		NAME	<b>RODRIGUEZ, DIEGO</b>	
STREET ADDRESS	3243 MARY ST		STREET ADDRESS	<b>324T MARY ST</b>	
CITY-ST-ZIP	COCONUT GROVE FL 33133		CITY-ST-ZIP	<b>COCONUT GROVE, FL 33133</b>	
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PAULIS, JOHN		NAME		
STREET ADDRESS	3229 MARY ST		STREET ADDRESS		
CITY-ST-ZIP	COCONUT GROVE FL 33133		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	<b>HEIMOWITZ, TODD</b>	
STREET ADDRESS			STREET ADDRESS	<b>3245 MARY ST</b>	
CITY-ST-ZIP			CITY-ST-ZIP	<b>COCONUT GROVE, FL 33133</b>	
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: 			Date: <b>4/23/04</b> (305) 447-8667		
ERLING T. THORESEN			Daytime Phone #		