

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000008132

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: GROVE DEVELOPMENT LLC

**Current Principal Place of Business:**

701 BRICKELL AVE.  
SUITE 3150  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

701 BRICKELL AVE.  
SUITE 3150  
MIAMI, FL 33131

**New Mailing Address:**

FEI Number: 65-1106182      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CMC GROUP, INC.  
701 BRICKELL AVE.  
#3150  
MIAMI, FL 33131 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: COLOMBO, UGO  
Address: 701 BRICKELL AVE. #3150  
City-St-Zip: MIAMI, FL 33131

Title: MGR ( ) Delete  
Name: MURPHY, ARTHUR J  
Address: 701 BRICKELL AVE. #3150  
City-St-Zip: MIAMI, FL 33131

Title: MGR ( ) Delete  
Name: RIDENHOUR, ESTHER  
Address: 701 BRICKELL AVE.#3150  
City-St-Zip: MIAMI, FL 33131

**ADDITIONS/CHANGES:**

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

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

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

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ESTHER RIDENHOUR

MGR

04/23/2009

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date