

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005760

FILED  
Jan 15, 2008  
Secretary of State

Entity Name: GROVELAND CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

8390 WEST FLAGLER STREET  
SUITE 213  
MIAMI, FL 33144

**New Principal Place of Business:**

8855 SW 27 ST  
MIAMI, FL 33165

**Current Mailing Address:**

8390 WEST FLAGLER STREET  
SUITE 213  
MIAMI, FL 33144

**New Mailing Address:**

8855 SW 27 ST  
MIAMI, FL 33165

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

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

APARICIO, LUIS  
8390 WEST FLAGLER STREET  
SUITE 213  
MIAMI, FL 33144 US

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

APARICIO, LUIS  
8855 SW 27 ST  
MIAMI, FL 33165 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: \_\_\_\_\_ 01/15/2008  
Electronic Signature of Registered Agent                      Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: CURBELO, ROBERT  
Address: 8390 WEST FLAGLER STREET, SUITE 213  
City-St-Zip: MIAMI, FL 33144

Title: D ( ) Delete  
Name: APRAICIO, LUIS  
Address: 8390 WEST FLAGLER STREET, SUITE 213  
City-St-Zip: MIAMI, FL 33144

Title: D ( ) Delete  
Name: MORELLI, EMMA  
Address: 8390 WEST FLAGLER STREET, SUITE 213  
City-St-Zip: MIAMI, FL 33144

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: CURBELO, ROBERT  
Address: 8855 SW 27 ST  
City-St-Zip: MIAMI, FL 33165

Title: D (X) Change ( ) Addition  
Name: APRAICIO, LUIS  
Address: 8855 SW 27 ST  
City-St-Zip: MIAMI, FL 33165

Title: D (X) Change ( ) Addition  
Name: MORELLI, EMMA  
Address: 8855 SW 27 ST  
City-St-Zip: MIAMI, FL 33165

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: LUIS APARICIO                      D                      01/15/2008  
Electronic Signature of Signing Officer or Director                      Date