

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08383

FILED
Mar 17, 2009
Secretary of State

Entity Name: GROVEDECO HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2945 BRIDGEPORT AVE.
MIAMI, FL 33133 US

New Principal Place of Business:

Current Mailing Address:

2945 BRIDGEPORT AVENUE
UNIT B
MIAMI, FL 33133 US

New Mailing Address:

FEI Number: 65-0035184 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STASAITIS, G PAUL
2945 BRIDGEPORT AVE.
UNIT B
MIAMI, FL 33133 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

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: STASAITIS, G PAUL
Address: 2945 BRIDGEPORT AVE UNIT B
City-St-Zip: MIAMI, FL 33133

Title: S () Delete
Name: PICARDO, SHERI
Address: 2945 BRIDGEPORT AVE UNIT H
City-St-Zip: MIAMI, FL 33133

Title: P () Delete
Name: ESPINOSA, ELIZABETH
Address: 2945 BRIDGEPORT AVE #G
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: SARKAR, SANDIP
Address: 2945 BRIDGEPORT AVE #A
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: BRAVO, GUSTAVO
Address: 2945 BRIDGEPORT AVENUE, UNIT F
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: STASAITIS, G PAUL
Address: 2945 BRIDGEPORT AVE, UNIT B
City-St-Zip: MIAMI, FL 33133

Title: S (X) Change () Addition
Name: ESPINOZA, ELIZABETH
Address: 2945 BRIDGEPORT AVE, UNIT G
City-St-Zip: MIAMI, FL 33133

Title: P (X) Change () Addition
Name: FIGUEROA, ALFRED
Address: 2945 BRIDGEPORT AVE, UNIT H
City-St-Zip: MIAMI, FL 33133

Title: D (X) Change () Addition
Name: BOGE, BERK
Address: 1506 TUNIS AVENUE
City-St-Zip: CORAL GABLES, FL 33134

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 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: G. PAUL STASAITIS

T

03/17/2009

Electronic Signature of Signing Officer or Director

Date