

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001827

FILED
May 06, 2007
Secretary of State

Entity Name: GROVE WALK TOWNHOMES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3135 GIFFORD LANE
UNIT C
MIAMI, FL 33133 US

New Principal Place of Business:

3135 GIFFORD LANE
UNIT D
MIAMI, FL 33133 US

Current Mailing Address:

3135 GIFFORD LANE
UNIT C
MIAMI, FL 33133 US

New Mailing Address:

3135 GIFFORD LANE
UNIT D
MIAMI, FL 33133 US

FEI Number: 65-0485770 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BAZZELL, JENNIFER K
3135 GIFFORD LANE
UNIT C
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

SMITH, KATIE
3135 GIFFORD LANE
UNIT D
MIAMI, FL 33133 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: KATIE SMITH

05/06/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: BAZZELL, JENNIFER K
Address: 3135 GIFFORD LANE UNIT C
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: MURPHY, KATIE
Address: 3135 GIFFORD LANE, UNIT D
City-St-Zip: MIAMI, FL 33133 US

Title: DS () Delete
Name: SOMBERG, SARA
Address: 3135 GIFFORD LANE, UNIT F
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SMITH, KATIE PRESIDE
Address: 3135 GIFFORD LANE UNIT D
City-St-Zip: MIAMI, FL 33133

Title: S (X) Change () Addition
Name: NIETO, FABIO SECRETA
Address: 3135 GIFFORD LANE, UNIT C
City-St-Zip: MIAMI, FL 33133 US

Title: T (X) Change () Addition
Name: GURDIAN, MANUEL A TREASUR
Address: 3135 GIFFORD LANE, UNIT B
City-St-Zip: MIAMI, FL 33133

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: FABIO NIETO

S

05/06/2007

Electronic Signature of Signing Officer or Director

Date