

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000804

FILED
Jan 31, 2008
Secretary of State

Entity Name: COCOGROVE VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2550 SOUTH DIXIE HIGHWAY
COCONUT GROVE, FL 33133 US

New Principal Place of Business:

Current Mailing Address:

2550 SOUTH DIXIE HIGHWAY
COCONUT GROVE, FL 33133 US

New Mailing Address:

FEI Number: 65-0918359

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARBOLEYA, CARLOS J
2550 SOUTH DIXIE HIGHWAY
COCONUT GROVE, 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: PD () Delete
Name: ARBOLEYA JR, CARLOS
Address: 2550 S DIXIE HWY
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: BARCELO-PEREZ, TERESA
Address: 3074 BIRD AVENUE
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: WILLS, TIM
Address: 3074 BIRD AVENUE
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: SIERKE, NATALIA
Address: 3080 BIRD AVENUE
City-St-Zip: MIAMI, FL 33133

Title: SD () Delete
Name: MELODEE, FISH
Address: 3078 BIRD AVENUE
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: CARLOS J. ARBOLEYA, JR.

PD

01/31/2008

Electronic Signature of Signing Officer or Director

Date