2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004
Secretary of State

DOCUMENT# N98000005487

Entity Name: GROVE AT ALLAMANDA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3059 ALLAMANDA ST
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

3059 ALLAMANDA ST
MIAMI, FL 33133

New Mailing Address:

FEI Number: 65-1082869 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VASCONCELLOS, JON
3059 ALLAMANDA ST
MIAMI, FL 33133

Name and Address of New Registered Agent:

MATUS, ANDREW
3059 ALLAMANDA ST
MIAMI, FL 33133

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: ANDREW MATUS 04/12/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: VASCONCELLOS, JON
Address: 3059 ALLAMANDA ST
City-St-Zip: MIAMI, FL 33133

Title: TD ( ) Delete
Name: ZIADIE, BRIDGET
Address: 3057 ALLAMANDA ST
City-St-Zip: MIAMI, FL 33133

Title: SD (X) Delete
Name: VASCONCELLOS, KAREN
Address: 3059 ALLAMANDA ST
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MATUS, ANDREW
Address: 3059 ALLAMANDA ST
City-St-Zip: MIAMI, FL 33133

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 for the exemption stated in Section 119.07(3)(i), 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: ANDREW MATUS PD 04/12/2004
Electronic Signature of Signing Officer or Director Date