

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2006 8:00 am
Secretary of State

01-19-2006 90078 007 ****61.25

DOCUMENT # 765043 1. Entity Name BIRMGROVE TOWNHOUSES CONDOMINIUM, INC.					
Principal Place of Business CAPITAL DEV AND INVESTMENT CORP. 2150 CORAL WAY, SIXTH FLOOR MIAMI, FL 33145			Mailing Address CAPITAL DEV AND INVESTMENT CORP. 2150 CORAL WAY, SIXTH FLOOR MIAMI, FL 33145		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
4. FEI Number 65-0504654				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
SMITH, GARY V ESQ. 1230 NW 7TH STREET MIAMI, FL 33125			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	SOUCY, MELISSA		NAME		
STREET ADDRESS	C/O 2150 CORAL WAY 6TH FL		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33145		CITY-ST-ZIP		
TITLE	M	delete	TITLE	☐ Change ☐ Addition	
NAME	LOVIO, HECTOR		NAME		
STREET ADDRESS	% 2150 CORAL WAY, 6TH FLOOR		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33145		CITY-ST-ZIP		
TITLE	VD	☒ Delete	TITLE	☐ Change ☒ Addition	
NAME	MURRAY, DAVID		NAME	VD BONNELL STEPHEN	
STREET ADDRESS	2150 CORAL WAY 6TH FL		STREET ADDRESS	2150 CORAL WAY #6	
CITY-ST-ZIP	MIAMI, FL 33145		CITY-ST-ZIP	MIAMI, FL 33145	
TITLE	TD	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	ERDELL, ERICK		NAME		
STREET ADDRESS	2150 CORAL WAY 6TH FL		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33145		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>[Signature]</i> 1/6/06 305-858-5620 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # HECTOR LOVIO					