


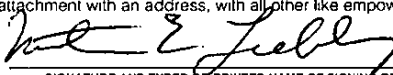
2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

02-28-2006 90015 016 ****61.25
 05-02-2006 90216 002 ****61.25

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DOCUMENT # 745563					
1. Entity Name GROVE ISLE ASSOCIATION, INC.					
Principal Place of Business ONE GROVE ISLE DRIVE COCONUT GROVE, FL 33133		Mailing Address ONE GROVE ISLE DRIVE COCONUT GROVE, FL 33133			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1875288	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
SKRLD, INC. 201 ALHAMERA CIRCLE SUITE 1102 CORAL GABLES, FL 33134			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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	DP	<input checked="" type="checkbox"/> Delete	TITLE	President	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARNER, STEPHEN		NAME	Edgar Lewis	
STREET ADDRESS	ONE GROVE ISLE DR #1809A		STREET ADDRESS	One Grove Isle Drive #905	
CITY-ST-ZIP	COCONUT GROVE, FL 33133		CITY-ST-ZIP	Coconut Grove, FL 33133	
TITLE	DVP	<input checked="" type="checkbox"/> Delete	TITLE	Vice-President	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LIEBLING, MARTIN		NAME	Robert Miller	
STREET ADDRESS	ONE GROVE ISLE DRIVE #1209		STREET ADDRESS	Three Grove Isle Drive #1402	
CITY-ST-ZIP	COCONUT GROVE, FL 33133		CITY-ST-ZIP	Coconut Grove, FL 33133	
TITLE	DS	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOORE, TIMOTHY		NAME		
STREET ADDRESS	THREE GROVE ISLE DRIVE #1609		STREET ADDRESS		
CITY-ST-ZIP	COCONUT GROVE, FL 33133		CITY-ST-ZIP		
TITLE	DT	<input checked="" type="checkbox"/> Delete	TITLE	Treasurer	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KUDEVIZ, JACK		NAME	Martin Liebling	
STREET ADDRESS	THREE GROVE ISLE DR #509		STREET ADDRESS	One Grove Isle Drive #1209	
CITY-ST-ZIP	COCONUT GROVE, FL 33133		CITY-ST-ZIP	Coconut Grove, FL 33133	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: 		Martin E. Liebling		4/15/06 305-858-1207	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	