

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 27, 2008 8:00 am
Secretary of State

03-27-2008 90030 025 ****61.25

DOCUMENT # N46606

1. Entity Name

VILLAGE OF CENTER GROVE, INC.



Principal Place of Business

3090 VIRGINIA ST.
COCONUT GROVE FL 33133
US

Mailing Address

3090 VIRGINIA ST.
COCONUT GROVE FL 33133
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

65-0313353

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

MCCONNELL, SUE
3090 VIRGINIA ST.
COCONUT GROVE FL 33133

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

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

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

TITLE DS ☒ Delete
NAME SARNOFF, MARC D
STREET ADDRESS 2580 LINCOLN AVE
CITY-ST-ZIP COCONUT GROVE FL 33133

TITLE DP ☒ Delete
NAME ALEXANDER, RYAN
STREET ADDRESS 3165 NEW YORK ST.
CITY-ST-ZIP COCONUT GROVE FL 33133

TITLE DT ☐ Delete
NAME MCCONNELL, SUE
STREET ADDRESS 3090 VIRGINIA STREET
CITY-ST-ZIP COCONUT GROVE FL 33133

TITLE V ☐ Delete
NAME KURLAND, NATHAN
STREET ADDRESS 3132 DAY AVE
CITY-ST-ZIP COCONUT GROVE FL 33133

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Pres ☒ Change ☐ Addition
NAME SUE MCCONNELL
STREET ADDRESS 3090 VIRGINIA ST.
CITY-ST-ZIP COCONUT GROVE FL 33133

TITLE Secy ☐ Change ☒ Addition
NAME Lisa Butler
STREET ADDRESS 2580 LINCOLN AVE
CITY-ST-ZIP COCONUT GROVE FL 33133

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SUE MCCONNELL

3.12.08