

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 30, 2024

Secretary of State

0367685414CC

DOCUMENT# 745563

Entity Name: GROVE ISLE ASSOCIATION, INC.

Current Principal Place of Business:

ONE GROVE ISLE DRIVE
COCONUT GROVE, FL 33133

Current Mailing Address:

ONE GROVE ISLE DRIVE
COCONUT GROVE, FL 33133 US

FEI Number: 59-1875288

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SKRLD, INC.
201 ALHAMERA CIRCLE
SUITE 1100
CORAL GABLES, FL 33134 US

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: LISA LERNER

01/30/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT	Title	VP
Name	GILMORE, KAREN	Name	GIDDINGS, JANETTE
Address	MANAGEMENT OFFICE 1 GROVE ISLE DRIVE	Address	MANAGEMENT OFFICE 1 GROVE ISLE DRIVE
City-State-Zip:	MIAMI FL 33133	City-State-Zip:	MIAMI FL 33133
Title	DIRECTOR	Title	DIRECTOR
Name	STONE, JOE	Name	FISHER, IKE
Address	MANAGEMENT OFFICE 1 GROVE ISLE DRIVE	Address	MANAGEMENT OFFICE 1 GROVE ISLE DRIVE
City-State-Zip:	MIAMI FL 33133	City-State-Zip:	MIAMI FL 33133
Title	DIRECTOR	Title	TREASURER
Name	ROUSSEAU, REGINA	Name	TOOTLE, NICK
Address	MANAGEMENT OFFICE 1 GROVE ISLE DRIVE	Address	MANAGEMENT OFFICE 1 GROVE ISLE DRIVE
City-State-Zip:	MIAMI FL 33133	City-State-Zip:	MIAMI FL 33133
Title	DIRECTOR	Title	SECRETARY
Name	WHITE, RANDY	Name	CABRERRA, XENIA
Address	MANAGEMENT OFFICE 1 GROVE ISLE DRIVE	Address	MANAGEMENT OFFICE 1 GROVE ISLE DRIVE
City-State-Zip:	MIAMI FL 33133	City-State-Zip:	MIAMI FL 33133

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I hereby 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 all other like empowered.

SIGNATURE: KAREN GILMORE

PRESIDENT

01/30/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name GOMEZ, ORLANDO
Address MANAGEMENT OFFICE
 1 GROVE ISLE DRIVE
City-State-Zip: MIAMI FL 33133