

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

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

**FEI Number: 59-1875288**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SKRLD, INC.  
201 ALHAMERA CIRCLE  
SUITE 1102  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name LEWIS, EDGAR  
Address ONE GROVE ISLES DR., #905  
City-State-Zip: COCONUT GROVE FL 33133

Title VP  
Name MILLER, ROBERT  
Address THREE GROVE ISLE DR., #1402  
City-State-Zip: COCONUT GROVE FL 33133

Title DS  
Name MOORE, TIMOTHY  
Address THREE GROVE ISLE DRIVE #1609  
City-State-Zip: COCONUT GROVE FL 33133

Title T  
Name LIEBLING, MARTIN  
Address ONE GROVE ISLE DR., #1209  
City-State-Zip: COCONUT GROVE FL 33133

Title D  
Name KOSOWSKY, HOWARD  
Address TWO GROVE ISLE DR # 1204  
City-State-Zip: COCONUT GROVE FL 33133

Title D  
Name DELASTER, JACK  
Address TWO GROVE ISLE # 902  
City-State-Zip: COCONUT GROVE FL 33133

Title DIRECTOR  
Name JACKO, ROBERT  
Address 2 GROVE ISLE DRIVE  
#203  
City-State-Zip: COCONUT GROVE FL 33133

Title DIRECTOR  
Name FLETCHER, PAUL  
Address 1 GROVE ISLE DRIVE  
#304  
City-State-Zip: COCONUT GROVE 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: EDGAR LEWIS**

**PRESIDENT**

**01/25/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           STEINBOOK, SUZANNE  
Address        3 GROVE ISLE DRIVE  
                #702  
City-State-Zip: COCONUT GROVE FL 33133