

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 746734

**Entity Name:** COUNTRY CLUB APARTMENTS OF MILES GRANT  
CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5111 S.E. MILES GRANT RD.,BOX 105A  
STUART, FL 34997

**Current Mailing Address:**

5111 S.E. MILES GRANT RD.,BOX 105A  
STUART, FL 34997

**FEI Number: 59-1917981**

**Certificate of Status Desired: No**

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

WEST, SHARON  
5111 S.E. MILES GRANT RD.,BOX 105A  
STUART, FL 34997 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: SHARON WEST**

**01/23/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title V, PRESIDENT  
Name OHSBERG, RUSSELL  
Address 5111 S.E. MILES GRANT RD.,BOX  
105A  
City-State-Zip: STUART FL 34997

Title P, VP  
Name BREWER, KRISTA  
Address 5111 S.E. MILES GRANT RD.,BOX  
105A  
City-State-Zip: STUART FL 34997

Title ST, SECRETARY, TREASURER  
Name WEST, SHARON  
Address 5111 S.E. MILES GRANT RD.,BOX  
105A  
City-State-Zip: STUART FL 34997

Title ASSISTANT TO THE TREASURER  
Name FRITH, ANN  
Address 5111 SE MILES GRANT RD., BOX 105  
A  
City-State-Zip: STUART FL 34997

*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: RUSSELL OHSBERG**

**PRESIDENT**

**01/23/2022**

Electronic Signature of Signing Officer/Director Detail

Date