

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

DOCUMENT# 753109

**FILED  
Apr 30, 2013  
Secretary of State  
CC1293396294**

**Entity Name:** NORTH MIAMI SUNKIST GROVE HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

12500 NW 13 AVENUE  
N. MIAMI, FL 33167

**Current Mailing Address:**

P.O. BOX 680-0752  
N. MIAMI, FL 33268

**FEI Number: 65-0021706**

**Certificate of Status Desired: No**

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

SCOTT, GALVIN  
1755 NE 137 TERRACE  
N. MIAMI, FL 33181 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 FORDE-KING, CHRISTINE  
Address 1270 NW 131 STREET  
City-State-Zip: N MIAMI FL 33167

Title V1  
Name JAMES, JASON  
Address 1560 NW 129 STREET  
City-State-Zip: N MIAMI FL 33168

Title T  
Name ENGLISH, GRACE  
Address 1010 NW 128 TERRACE  
City-State-Zip: N MIAMI FL 33168

Title S  
Name FORDE, ANDREA  
Address 1645 NW 132 STREET  
City-State-Zip: N MIAMI FL 33167

Title V2  
Name ALSTON, JESSICA  
Address 1140 NW 125 STREET  
City-State-Zip: N MIAMI FL 33168

*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: ANDREA FORDE**

**SECRETARY**

**04/30/2013**

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

\_\_\_\_\_  
Date