I hereby certify that the information indicated on this report or supplemental report is true and accurate		
oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute	e this report as required by Chapter 617, Florida Statu	tes; and that my name appears
above, or on an attachment with all other like empowered.		
SIGNATURE: GARY SCHARPS	PRESIDENT	03/24/2014

PRESIDENT

SIGNATURE: GARY SCHARPS

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# 763330 Entity Name: COCONUT GROVE VILLAS HOMEOWNERS ASSOCIATION, INC.

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

3080 VIRGINIA ST. MIAMI, FL 33133

Current Mailing Address:

3080 VIRGINIA ST. MIAMI, FL 33133

FEI Number: 65-0102656

Name and Address of Current Registered Agent:

SCHARPS, GARY 3080 VIRGINIA ST. MIAMI, FL 33133 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:

Officer/Director

Title	PTD	Title	D
Name	SCHARPS, GARY	Name	MCCONNELL, SUE
Address	3080 VIRGINIA ST.	Address	3090 VIRGINIA ST.
City-State-Zip:	MIAMI FL 33133	City-State-Zip:	MIAMI FL 33133

lectronic Signature of Registered Agent				
Detail :				
C	Title	D		
HARPS, GARY	Name	MCCONNELL, SUE		

FILED Mar 24, 2014 Secretary of State CC7860814657

Date

Certificate of Status Desired: No

Date