

**2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N02000008179

**FILED  
Aug 12, 2016  
Secretary of State  
CC751797775**

**Entity Name:** THE COVE AT BRIAR BAY CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O GRS MANAGEMENT ASSOCIATES INC  
3900 WOODLAKE BLVD SUITE 309 LAKE  
LAKE WORTH , FL 33463

**Current Mailing Address:**

C/O GRS MANAGEMENT ASSOCIATES INC  
3900 WOODLAKE BLVD SUITE 309 LAKE  
LAKE WORTH , FL 33463 US

**FEI Number: 14-1865872**

**Certificate of Status Desired: No**

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

KORTE & WORTMAN PA  
2041 VISTA PARKWAY  
SUITE 102  
WEST PALM BEAC H, FL 33411 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: SCOTT WORTMAN**

**08/12/2016**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            NDUNGU, JOHN MAINA  
Address        C/O GRS MANAGEMENT ASSOCIATES  
                  INC  
                  3900 WOODLAKE BLVD SUITE 309  
                  LAKE  
City-State-Zip: LAKE WORTH FL 33463

Title            VP  
Name            PARAHOO, SHARDA  
Address        C/O GRS MANAGEMENT ASSOCIATES  
                  INC  
                  3900 WOODLAKE BLVD SUITE 309  
                  LAKE  
City-State-Zip: LAKE WORTH FL 33463

Title            S  
Name            BENNETT, SHEILA  
Address        C/O GRS MANAGEMENT ASSOCIATES  
                  INC  
                  3900 WOODLAKE BLVD SUITE 309  
                  LAKE  
City-State-Zip: LAKE WORTH FL 33463

Title            TD  
Name            OROFINO, VINCENT  
Address        C/O GRS MANAGEMENT ASSOCIATES  
                  INC  
                  3900 WOODLAKE BLVD SUITE 309  
                  LAKE  
City-State-Zip: LAKE WORTH FL 33463

Title            DIR  
Name            GRAYSON, ADAM  
Address        C/O GRS MANAGEMENT ASSOCIATES  
                  INC  
                  3900 WOODLAKE BLVD SUITE 309  
                  LAKE  
City-State-Zip: LAKE WORTH FL 33463

*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: JOHN MAINA NDUNGU**

**PRESIDENT**

**08/12/2016**

Electronic Signature of Signing Officer/Director Detail

Date