

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000003367

**Entity Name:** VILLAGE OF CENTER GROVE FOUNDATION, INC.

**Current Principal Place of Business:**

3090 VIRGINIA ST.  
MIAMI, FL 33133

**Current Mailing Address:**

3090 VIRGINIA ST.  
MIAMI, FL 33133

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

MCCONNELL, SUE  
3090 VIRGINIA ST  
COCONUT GROVE, 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:**

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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title                      D  
Name                      MCCONNELL, SUE  
Address                      3090 VIRGINIA ST  
City-State-Zip:              COCONUT GROVE FL 33133

Title                      D  
Name                      COLLINS, TRINA  
Address                      3230 GIFFORD LN  
City-State-Zip:              COCONUT GROVE FL 33133

*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:** SUE MCCONNELL

**PRESIDENT**

**04/18/2023**

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

\_\_\_\_\_  
Date