

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

DOCUMENT# N08383

**Entity Name:** GROVEDECO HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2945 BRIDGEPORT AVE.  
A  
MIAMI, FL 33133

**FILED**  
**Mar 13, 2013**  
**Secretary of State**  
**CC7468560331**

**Current Mailing Address:**

2945 BRIDGEPORT AVENUE  
UNIT A  
MIAMI, FL 33133 US

**FEI Number: 65-0035184**

**Certificate of Status Desired: No**

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

GROVEDECO HOMEOWNERS ASSOCIATION, INC  
2945 BRIDGEPORT AVE.  
UNIT B  
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: G PAUL STASAITIS**

**03/13/2013**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title S  
Name STASAITIS, G PAUL  
Address 2945 BRIDGEPORT AVE, UNIT B  
City-State-Zip: MIAMI FL 33133

Title DIRECTOR  
Name ESPINOZA, ELIZABETH  
Address 2945 BRIDGEPORT AVE, UNIT G  
City-State-Zip: MIAMI FL 33133

Title PRESIDENT  
Name YRAIZOZ, JUAN CARLOS  
Address 2945 BRIDGEPORT AVE, UNIT A  
City-State-Zip: MIAMI FL 33133

Title TREASURER  
Name SASAKI, KEITH  
Address 2945 BRIDGEPORT AVE, UNIT C  
City-State-Zip: MIAMI FL 33133

Title DIRECTOR  
Name FIGUEROA, ALFRED  
Address 2945 BRIDGEPORT AVE  
UNIT H  
City-State-Zip: MIAMI 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: G PAUL STASAITIS**

**SECRETARY**

**03/13/2013**

Electronic Signature of Signing Officer/Director Detail

Date