

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22827

FILED
Jan 24, 2023
Secretary of State
3040483066CC

Entity Name: GROVE SQUARE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2801 FLORIDA AVE
MANAGEMENT OFFICE SUITE #100
COCONUT GROVE, FL 33133

Current Mailing Address:

2801 FLORIDA AVE.
MANAGEMENT OFFICE SUITE #100
COCONUT GROVE, FL 33133 US

FEI Number: 65-0016544

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GOEDE, DEBOEST & CROSS PLLC
2600 DOUGLAS ROAD
SUITE #717
CORAL GABLES, FL 33134 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: MARGO ALVAREZ

01/24/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name LEVINE, ROBERT
Address 2801 FLORIDA AVENUE
MANAGEMENT OFFICE-SUITE #100
City-State-Zip: COCONUT GROVE FL 33133

Title PRESIDENT
Name WENZEL, PETER
Address 2801 FLORIDA AVENUE
MANAGEMENT OFFICE-SUITE #100
City-State-Zip: COCONUT GROVE FL 33133

Title VP
Name LAUTER, MICHAEL
Address 2801 FLORIDA AVE.
MANAGEMENT OFFICE-SUITE #100
City-State-Zip: COCONUT GROVE FL 33133

Title DIRECTOR
Name DUNCAN, JAMES
Address 2801 FLORIDA AVE.
MANAGEMENT OFFICE-SUITE #100
City-State-Zip: COCONUT GROVE FL 33133

Title TREASURER
Name D'AURIA, BRUCE JOHN
Address 2801 FLORIDA AVE.
MANAGEMENT OFFICE SUITE #100
City-State-Zip: COCONUT GROVE FL 33133

Title DIRECTOR
Name FONS, ADAN
Address 2801 FLORIDA AVE.
MANAGEMENT OFFICE SUITE #100
City-State-Zip: COCONUT GROVE FL 33133

Title SECRETARY
Name DIAMOND, ANDREW
Address 2801 FLORIDA AVE.
MANAGEMENT OFFICE SUITE #100
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: PETER WENZEL

PRESIDENT

01/24/2023

Electronic Signature of Signing Officer/Director Detail

Date