

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

DOCUMENT# N98000005487

**FILED**  
**Feb 08, 2016**  
**Secretary of State**  
**CC9182450350**

**Entity Name:** GROVE AT ALLAMANDA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3059 ALLAMANDA ST  
MIAMI, FL 33133

**Current Mailing Address:**

3059 ALLAMANDA ST  
MIAMI, FL 33133

**FEI Number:** 65-1082869

**Certificate of Status Desired:** No

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

MATUS, ANDREW  
3059 ALLAMANDA 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PD	Title	TD
Name	MATUS, ANDREW	Name	ZIADIE, BRIDGET
Address	3059 ALLAMANDA ST	Address	3057 ALLAMANDA ST
City-State-Zip:	MIAMI FL 33133	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: ANDREW MATUS**

**PD**

**02/08/2016**

Electronic Signature of Signing Officer/Director Detail

Date