


**NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jul 11, 2005 8:00 am**  
**Secretary of State**

07-11-2005 90116 032 \*\*\*\*61.25

**DOCUMENT # 720563**  
1. Entity Name  
MAISON GRANDE CONDOMINIUM ASSOC.



20062269

2. Principal Place of Business  
6039 Collins Avenue  
Suite, Apt. #, etc.

3. Mailing Address  
6039 Collins Avenue  
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
Miami Beach, Fl.

City & State  
Miami Beach, Fl.

4. FEI Number  
59-1377619

Applied For  
Not Applicable

Zip  
33140

Country  
USA

Zip  
33140

Country  
USA

5. Certificate of Status Declared  \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name  
Rosa de La Camara

Street Address (P.O. Box Number is Not Acceptable)  
121 Alhambra Plaza #1000

City  
Coral Gables

FL

Zip Code  
33134

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when releasing)

DATE \_\_\_\_\_

9. Election Campaign Financing  
Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Calvin Kohli 6039 Collins Ave #929 Miami Beach, Fl. 33140	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Jarte De La Torre 6039 Collins Ave #827 Miami Beach, Fl. 33140
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice-President Bobi Neuman 6039 Collins Ave #808 Miami Beach, Fl. 33140	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Edward Casas 6039 Collins Ave #1034 Miami Beach, Fl. 33140	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Arlene Terrinoni 6039 Collins Ave #1607 Miami Beach, Fl. 33140	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Sheryl Shoup 6039 Collins Ave #1417 Miami Beach, Fl. 33140	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Rory Gershon 6039 Collins Ave #1103 Miami Beach, Fl. 33140	TITLE NAME STREET ADDRESS CITY-ST-ZIP	

CR2E037B (12/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: E. Casas E. CASAS 7/5/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #