

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720563

FILED
Jan 07, 2009
Secretary of State

Entity Name: MAISON GRANDE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6039 COLLINS AVE.
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

6039 COLLINS AVE.
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 59-1377619 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROUGH, CHADROW & LEVINE, P.A.
1900 NORTH COMMERCE PARKWAY
WESTON, FL 33326 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MELCHOR, ARIEL
Address: 6039 COLLINS AVENUE
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: S () Delete
Name: QUINTANA, JOANNA
Address: 6039 COLLINS AVENUE
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: T () Delete
Name: MARTIN, TANIA
Address: 6039 COLLINS AVE.
City-St-Zip: MIAMI BEACH, FL 33140

Title: VP () Delete
Name: NADRICH, MARILYN
Address: 6039 COLLINS AVE.
City-St-Zip: MIAMI BEACH, FL 33140

Title: D () Delete
Name: BENTO, URBANO
Address: 6039 COLLINS AVE.
City-St-Zip: MIAMI BEACH, FL 33140

Title: D () Delete
Name: ARAGON, HELENE
Address: 6039 COLLINS AVE.
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CONSUELO VILLAVERDE

D

01/07/2009

Electronic Signature of Signing Officer or Director

_____ Date

Attachment # 720563

1/7/09



Maison Grande
Condominium Association, Inc.

March 2nd, 2009

Florida Department of State
Attn: Division of Corporations
PO Box 6198
Tallahassee, FL 32314

RE: 2009 Annual Report & Amendment
Document #: 720563

To Whom It May Concern:

Please find enclosed the 2009 Annual Report Payment Voucher along with check #568 in the amount of \$61.25 payable to Florida Department of State for Document #720563. Please be advised that this letter will also serve as a request to add an additional Director to Maison Grande Condominium Association, Inc. It is imperative that **Dr. Consuelo Villaverde** be added immediately as a Director to our Corporation. As for your records and accuracy, Maison Grande Condominium Association, Inc. should now have seven (7) Officers. Thank you in advance for your prompt attention to this matter. If you have any questions, please feel free to contact me at the number below.

Sincerely,


Ariel Melchor
President
Maison Grande Condominium Association, Inc.

* The additional page was originally sent with payment voucher, but not imaged.