

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724083

FILED
May 01, 2009
Secretary of State

Entity Name: GROVE TOWNHOUSES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3025 MARY STREET
MIAMI, FL 33133 US

New Principal Place of Business:

Current Mailing Address:

3025 MARY STREET
13
MIAMI, FL 33133 US

New Mailing Address:

FEI Number: 59-1498214 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PASSMAN, BRYAN
3025 MARY STREET
4
COCONUT GROVE, FL 33133 US

Name and Address of New Registered Agent:

PASSMAN, BRYAN
3070 SHIPPING AVENUE
COCONUT GROVE, 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: BRYAN PASSMAN

05/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MONDSHEIN, ALEESA
Address: 3025 MARY ST, # 7
City-St-Zip: COCONUT GROVE, FL 33133

Title: VPD () Delete
Name: RAMIREZ, PATRICIA
Address: P.O. BOX 331254
City-St-Zip: MIAMI, FL 33233

Title: STD () Delete
Name: PASSMAN, BRYAN M
Address: 3025 MARY ST #4
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: STD (X) Change () Addition
Name: PASSMAN, BRYAN M
Address: 3070 SHIPPING AVENUE
City-St-Zip: COCONUT GROVE, FL 33133

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: BRYAN PASSMAN

TS

05/01/2009

Electronic Signature of Signing Officer or Director

Date