

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 730397

1. Entity Name

GROVES VILLAS HOMEOWNERS ASSOCIATION, INC.

FILED
Apr 07, 2000 8:00 am
Secretary of State

04-07-2000 90013 009 ****61.25

Principal Place of Business

LAND CAP PROPERTY SERVICES, INC
13800 SW 144 AVE ROAD
MIAMI FL 33186
US

Mailing Address

LAND CAP PROPERTY SERVICES, INC
13800 SW 144 AVE ROAD
MIAMI FL 33186-6765
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1958668

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LANDCAP PROPERTY SERV.
STEPHEN SUITS
13800 SW 144TH AVE RD
MIAMI FL 33186

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME TERRIER, OLIVER
STREET ADDRESS 5803 SW 144TH CIR, PL
CITY-ST-ZIP MIAMI FL 33183

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME VALENCIA, SANDRA
STREET ADDRESS 5871 SW 144TH CIR, PL
CITY-ST-ZIP MIAMI FL 33183

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☐ Delete
NAME SOCORRO, JEANETTE
STREET ADDRESS 5814 SW 144 CIR. PL
CITY-ST-ZIP MIAMI BEACH FL 33183

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME FERNANDEZ, LAZARO G
STREET ADDRESS 5811 SW 144 CIRCLE PLACE
CITY-ST-ZIP MIAMI FL 33183

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME TERRIER, GINA
STREET ADDRESS 5803 SW 144TH CIR, PL
CITY-ST-ZIP MIAMI FL 33183

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Go Oliver Oliver* OLIVER TERRIER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)