

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742103

FILED
Jan 08, 2009
Secretary of State

Entity Name: GROVE TERRACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O SANDRA T. NORTH
3020-3034 CENTER ST
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

C/O SANDRA T. NORTH
3024 CENTER ST
MIAMI, FL 33133

New Mailing Address:

FEI Number: 59-2062596

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRIS, DARLENE
3020 CENTER ST
MIAMI, FL 33133 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: STD () Delete
Name: MORRIS, DARLENE
Address: 3020 CENTER ST.
City-St-Zip: MIAMI, FL 33133

Title: P D () Delete
Name: CHORTFIELD, DAVID
Address: 3028 CENTER ST
City-St-Zip: MIAMI, FL 33133

Title: VPD () Delete
Name: KEHER, SHERYL
Address: 3030 CENTER ST
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: () 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: DARLENE MORRIS

SECR

01/08/2009

Electronic Signature of Signing Officer or Director

Date