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Aug 26 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **749437** (0)
1. Corporation Name
GROVE VIEW GARDEN HOMES ASSOCIATION, INC.



Principal Place of Business 3840 MAIN HWY MIAMI FL 33133 US	Mailing Address 3840 MAIN HWY MIAMI FL 33133-6511 US
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2. Principal Place of Business 21 420 S Dixie Hwy Suite, Apt. #, etc. 22 #2K City & State 23 Coral Gables FL Zip 24 33146 Country 25 USA	2a. Mailing Address 26 420 S Dixie Hwy Suite, Apt. #, etc. 27 #2K City & State 28 Coral Gables Zip 29 FL Country 30 USA
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3. Date Incorporated or Qualified 10/22/1979	3a. Date of Last Report 02/13/1996
4. FEI Number 59-2054358	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent
**KEELER, GRACE
3840 MAIN HWY
• MIAMI FL 33133-6511**

10. Name and Address of New Registered Agent
81 Name **MARYLOU MUSCILLO**
82 Street Address (P.O. Box Number is Not Acceptable)
3475 SW 1st Ave. #7
83 **MIAMI**
84 City
FL 85 Zip Code
33145

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Marylou Muscillo* **MARYLOU MUSCILLO, President** 5-1-97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	VD	☒ DELETE
NAME	VICKERS, MILTON	
STREET ADDRESS	815 NW 198TH ST	
CITY-ST-ZIP	MIAMI FL	
TITLE	PD	☒ DELETE
NAME	KEELER, GRACE	
STREET ADDRESS	3840 MAIN HWY	
CITY-ST-ZIP	MIAMI FL	
TITLE	SD	☒ DELETE
NAME	VIDANA, EVANGELINA	
STREET ADDRESS	3475 S.W. 1ST AVE #17	
CITY-ST-ZIP	MIAMI FL	
TITLE	TD	☒ DELETE
NAME	VICKERS EVELYN	
STREET ADDRESS	3255 NW 53RD ST	
CITY-ST-ZIP	MIAMI FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Marylou Muscillo, President ☒ Change ☐ Addition
1.2 NAME	3475 SW 1st Ave #7
1.3 STREET ADDRESS	MIAMI, FL 33145 (D)
1.4 CITY-ST-ZIP	
2.1 TITLE	Kevin Keeler, Secretary ☒ Change ☐ Addition
2.2 NAME	3475 SW 1st Ave #4
2.3 STREET ADDRESS	MIAMI, FL 33145 (D)
2.4 CITY-ST-ZIP	
3.1 TITLE	Joy Henzelmann, Vice Pres. ☒ Change ☐ Addition
3.2 NAME	1865 Brickell Ave #A-1510
3.3 STREET ADDRESS	MIAMI, FL 33129 (D)
3.4 CITY-ST-ZIP	
4.1 TITLE	Craig Bozarth, Treasurer ☒ Change ☐ Addition
4.2 NAME	3475 SW 1st Ave #1
4.3 STREET ADDRESS	MIAMI, FL 33145 (D)
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	500002279515
6.3 STREET ADDRESS	-08/28/97--01046--004
6.4 CITY-ST-ZIP	***61.25 PC 4.26

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Marylou Muscillo* **MARYLOU MUSCILLO** 5-1-97 (305) 415-8070

CR2037 (9/96)