

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751645

FILED
Apr 25, 2008
Secretary of State

Entity Name: GROVE GATE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3176 SW 27 AVE
COCONUT GROVE, FL 33133

New Principal Place of Business:

Current Mailing Address:

3176 SW 27 AVE
#6
COCONUT GROVE, FL 33133

New Mailing Address:

FEI Number: 59-1995467

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRUCE A. ARRICK
9130 S. DADELAND BLVD.
#1500
MIAMI, FL 33156 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: PD () Delete
Name: FRAZIER, ROBERT C
Address: 3176 SW 27 AVE #4
City-St-Zip: MIAMI, FL 33133

Title: SD () Delete
Name: BROWN, LINDA
Address: 3945 LOQUAT AVE
City-St-Zip: MIAMI, FL 33133

Title: TD () Delete
Name: ROMANO, TONY
Address: 3176 SW 27 AVE. #6
City-St-Zip: COCONUT GROVE, 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: TONY ROMANO

TD

04/25/2008

Electronic Signature of Signing Officer or Director

Date