

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90533 043 *****70.00

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1. Entity Name

THE GRAND CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**1717 N. BAYSHORE DR
MIAMI FL 33132-1148**

Mailing Address

**1717 N. BAYSHORE DR
MIAMI FL 33132-1148**

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 **59-2362349**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**EISINGER, DENNIS
C/O PHILLIPS, EISINGER & KOSS, P.A.
4000 HOLLYWOOD BLVD, STE 265 SOUTH
HOLLYWOOD FL 33021**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	T	☐ Delete
NAME	GRIMES, JULIE	
STREET ADDRESS	1717 N BAYSHORE DR STE 2032	
CITY-ST-ZIP	MIAMI FL 33132	
TITLE	P	☐ Delete
NAME	SAMTER, RON	
STREET ADDRESS	1717 N BAYSHORE DR #4232	
CITY-ST-ZIP	MIAMI FL	
TITLE	S	☐ Delete
NAME	JOSEPH, FRED	
STREET ADDRESS	1717 N. BAYSHORE DR., STE. 3856	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	☐ Delete
NAME	LACLE, ROBERT	
STREET ADDRESS	1717 N. BAYSHORE DR., STE. 2931	
CITY-ST-ZIP	MIAMI FL 33132	
TITLE	D	☒ Delete
NAME	BERUBE, CHRISTIAN	
STREET ADDRESS	1717 N BAYSHORE DR	
CITY-ST-ZIP	MIAMI FL	
TITLE	V	☐ Delete
NAME	NEUMANN, ADELE	
STREET ADDRESS	1717 N BAYSHORE DRIVE # 2231	
CITY-ST-ZIP	MIAMI FL 33132	

TITLE	P	☐ Change ☒ Addition
NAME	LINARES, JULIAN	
STREET ADDRESS	1717 N. BAYSHORE DR. # 1156	
CITY-ST-ZIP	MIAMI FL 33132.	
TITLE	D	☐ Change ☒ Addition
NAME	KILWANI, RICK	
STREET ADDRESS	1717 N. BAYSHORE DR # 2641	
CITY-ST-ZIP	MIAMI FL 33132	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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: **SIGNATURE OF Association Controller 1/23/2003 (305) 3491164**

CR2E037 (10/02)