

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 26, 2006
Secretary of State**

DOCUMENT# N01136

Entity Name: GROVE PARK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

% THEODORA LONG
901 N.W. 14TH COURT
MIAMI, FL 33125

New Principal Place of Business:

Current Mailing Address:

% THEODORA LONG
901 N.W. 14TH COURT
MIAMI, FL 33125

New Mailing Address:

FEI Number: 59-2430414 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LABORA, ALEXANDER J
1645 N.W. 8TH STREET
MIAMI, FL 33125 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: LONG, THEODORA
Address: 901 N.W. 14TH COURT
City-St-Zip: MIAMI, FL 33125

Title: VD () Delete
Name: WHITE-LABORA, DEBORAH
Address: 1645 N.E. 8TH STREET
City-St-Zip: MIAMI, FL 33125

Title: SD () Delete
Name: PARKS, KATHERINE
Address: 1621 NW SO RIVER DR
City-St-Zip: MIAMI, FL 33125

Title: TD () Delete
Name: ALVEREZ, PEDRO
Address: 1646 N.W. 8TH STREET
City-St-Zip: MIAMI, FL 33125

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: THEODORA LONG

PD

04/26/2006

Electronic Signature of Signing Officer or Director

_____ Date