2005 NOT-FOR-PROFIT CORPORATION

changed, or on an attachment with an

SIGNATURE:

Feb 16, 2005 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # N03000004495 02-16-2005 90022 037 ****61.25 CHATEAU GROVE CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 10556 NW 26 ST 10556 NW 26 ST 40010043 STE D203 STE D203 MIAMI, FL 33172 MIAMI, FL 33172 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01072005 Chg-NP CR2E037 (10/03) City & State City & State Applied For 4. FEI Number 20-0561403 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7.: Name and Address of New Registered Agent :--ARROM, ORLANDO 10556 NW 26 ST Street Address (P.O. Box Number is Not Acceptable) STE D203 MIAMI, FL 33172 City 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 SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 Make check payable to Trust Fund Contribution. Florida Department of State Due by May 1, 2005 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE PTD Delete TITLE Change MARTINEZ, ALFONSO NAME Charles T. Wright 3265 Virginia St, Unit#9 Coconut Grove, FL 32133 NAME STREET ADDRESS 10556 NW 26TH STREET, SUITE D-203 STREET ADDRESS MIAMI, FL 33172 CITY-ST-ZIP CRY-ST-7P TITLE SD Detete TITLE Addition **BUSTAMANTE, ERNESTO** NALE NAE Juan Gomez 3065 virginiast, Unit#11 STREET ADDRESS 10556 NW 26TH STREET, SUITE D-203 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33172 CITY-ST-78P COCONUT Grove, FL 33133 TITLE SID Jessica I., Rosman Defete TITLE Change Addition NAME 3265 virginia st, Unit #1 Co Conut Grove, FL 333 STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-70 ☐ Delete πLE ☐ Change Addition NAME NAME matthew G. Walker STREET ADDRESS STREET ADDRESS 3265 Virginia St, Unit #12 Coconut grove, PC 33133 CITY-ST-ZIP CITY-ST-ZIF TITS F Delete TITLE Addition NAME 3345 virginia St, Unit#23 NAME STREET ADDRESS STREET ADDRESS CITY-ST-78 CTY-ST-7P IIITE ПΠЕ ☐ Delete ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 ampowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

FILED