2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # N03000008547

1. Entity Name

UNITED GRAND CONDOMINIUM OWNERS, INC.



FILED Apr 04, 2007 08:00 A Secretary of State

Principal Place of Business

1717 N. BAYSHORE DR. #2331

APT. 2331

MIAMI, FL 33132 US

Mailing Address

1717 N. BAYSHORE DR. 2331

APT. 2331

MIAMI, FL 33132 US



03252007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 20-0234464 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

CANTWELL, RONALD 1717 N. BAYSHORE DR. # 2331 APT. 2331 MIAMI, FL 33132

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	re named entity submits this statement for the ations of registered agent.	purpose of changing its registered office or registered agent, or bot	h, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and bt	te if applicable. (NOTE: Registered Agent signature required when renetating)	DATE
	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	000000689612 04/11/07-80042-004 61.25
10.	OFFICERS AND DIRI	ECTORS	

10.	OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CANTWELL, RONALD 1717 N BAYSHORE DR #2331 MIAMI, FL 33132			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP COHN, SUSAN 1717 N BAYSHORE DR #4131 MIAMI, FL 33132			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHATZMAN, LARRY O 1717 N BAYSHORE DR #2254 MIAMI, FL 33132			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
12. Thereby certify that the information supplied with this filling does not qualify for the ex-				

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

TYPED OR PROTECTIONANCE OF BIGHING OFFICER OR DIRECTOR

3/20/67(305)377-9613