

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03237

FILED  
Mar 14, 2008  
Secretary of State

**Entity Name:** OAKGROVE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2717 SW 22ND AVE  
MIAMI, FL 33133 US

**New Principal Place of Business:**

**Current Mailing Address:**

2717 SW 22ND AVE  
MIAMI, FL 33133 US

**New Mailing Address:**

**FEI Number:** 65-0341972

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MARS, GARY ESQ.  
150 WEST FLAGLER ST.  
MUSEUM TOWER, 27TH FLOOR  
MIAMI, FL 33130 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: DPT ( ) Delete  
Name: DOLLAWAY, WILLIAM H  
Address: 2717 SW 22 AVE  
City-St-Zip: MIAMI, FL 33133

Title: DS ( ) Delete  
Name: MILLER, RANDY  
Address: 2721 SW 22 AVE  
City-St-Zip: MIAMI, FL 33133

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: WILLIAM H. DOLLAWAY

PRES

03/14/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date