2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001363

FILED Feb 08, 2006 Secretary of State

Entity Name: THE GROVE AT WILTON MANORS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2005 S FEDERAL HIGHWAY 2660 NE 8TH AVE

SUITE 103 OFFICE

FORT LAUDERDALE, FL 33316 WILTON MANORS, FL 33334

Current Mailing Address: New Mailing Address:

2005 S FEDERAL HIGHWAY 2660 NE 8TH AVE

SUITE 103 OFFICE

FORT LAUDERDALE, FL 33316 WILTON MANORS, FL 33334

FEI Number: 30-0311887 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PUJARA, PURVIN COREA, MICHAEL T 2005 S FEDERAL HWY SUITE 103 2660 NE 8TH AVE

FORT LAUDERDALE, FL 33316 US OFFICE WILTON MANORS, FL 33334 US

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: MICHAEL T COREA 02/08/2006

Electronic Signature of Registered Agent Date

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

itle: D () Delete Title: P (X) Change() Addition

Name: PUJARA, PURVIN Name: COLLINS, CASS
Address: 2005 S FEDERAL HWY SUITE 103 Address: 2660 NE 8TH AVE

City-St-Zip: FORT LAUDERDALE, FL 33316 City-St-Zip: WILTON MANORS, FL 33334

Title: D () Delete Title: T (X) Change () Addition Name: SCHECHER, GLENN R Name: JUST, ALAN

Address: 1520 E. SUNRISE BOULEVARD Address: 2660 NE 8TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33304 City-St-Zip: WILTON MANORS, FL 33334

Title: D () Delete Title: S (X) Change () Addition

Name: HALE, KENNY Name: SEBREE, JAMES

 Address:
 1314 E. LAS OLAS BOULEVARD., #114
 Address:
 2660 NE 8TH AVE #109

 City-St-Zip:
 FORT LAUDERDALE, FL 33301
 City-St-Zip:
 WILTON MANORS, FL 33334

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: CASS COLLINS P 02/08/2006