

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003367

FILED  
Apr 27, 2005  
Secretary of State

**Entity Name:** VILLAGE OF CENTER GROVE FOUNDATION, INC.

**Current Principal Place of Business:**

3000 SHIPPING AVE  
MIAMI, FL 33133

**New Principal Place of Business:**

**Current Mailing Address:**

3000 SHIPPING AVE  
MIAMI, FL 33133

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

SARNOFF, MARC DAVID  
3000 SHIPPING AVE  
MIAMI, FL 33133 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: D ( ) Delete  
Name: SARNOFF, MARC DAVID  
Address: 3000 SHIPPING AVE  
City-St-Zip: MIAMI, FL 33133

Title: D ( ) Delete  
Name: ROBERMAN, LINDA  
Address: 3035 DAY AVE  
City-St-Zip: COCONUT GROVE, FL 33133

Title: D ( ) Delete  
Name: ALEXANDER, RYAN  
Address: 3165 NEW YORK ST  
City-St-Zip: COCONUT GROVE, FL 33133

Title: D ( ) Delete  
Name: MAJOR, DAVID  
Address: 2952 BRIDGEPORT AVE  
City-St-Zip: COCONUT GROVE, FL 33133

Title: D ( ) Delete  
Name: MCCONNELL, SUE  
Address: 3090 VIRGINIA ST  
City-St-Zip: COCONUT GROVE, FL 33133

Title: D ( ) Delete  
Name: COLLINS, TRINA  
Address: 3230 GIFFOR LN  
City-St-Zip: COCONUT GROVE, FL 33133

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

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

Title: D (X) Change ( ) Addition  
Name: SELTZER, IRWIN  
Address: 3111 MARY STREET  
City-St-Zip: COCONUT GROVE, FL 33133

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

Title: D (X) Change ( ) Addition  
Name: NIEMEYER, MICHELLE  
Address: 3250 DAY AVENUE  
City-St-Zip: COCONUT GROVE, FL 33133

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 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 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: MARC DAVID SARNOFF

D

04/27/2005

Electronic Signature of Signing Officer or Director

Date