


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2008 08:00 A
Secretary of State

DOCUMENT # N04000007272

1. Entity Name
MARBELLA BY THE GROVE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
FIDELITY PROPERTY MANAGEMENT
1722 SW 84 COURT
MIAMI, FL 33155

Mailing Address
FIDELITY PROPERTY MANAGEMENT
1722 SW 84 COURT
MIAMI, FL 33155



02252008 No Chg-NP CR2E037 (4/06)

4. FEI Number
20-1930959

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

FIDELITY PROPERTY MANAGEMENT
1722 SW 84 COURT
MIAMI, FL 33155

DO NOT WRITE IN THIS SPACE

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 the obligations of registered agent.

SIGNATURE *Marta Morales Property Manager* 2/28/08
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MORALES, MARTA 1722 SW 84 COURT MIAMI, FL 33155
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T VICENTE, RAMON 1722 SW 84 COURT MIAMI, FL 33155
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DO NOT WRITE IN THIS SPACE

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: *Marta* 2/28/08 305-987-0993
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #