## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000001221

FILED Apr 28, 2009 Secretary of State

Entity Name: GOLDEN GROVE CONDOMINIUM ASSOCIATION #3, INC. **Current Principal Place of Business: New Principal Place of Business:** 3203 MCDONALD STREET COCONUT GROVE, FL 33133 **Current Mailing Address: New Mailing Address:** 3203 MCDONALD STREET COCONUT GROVE, FL 33133 FEI Number: 20-2468068 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: NELSON, DARLENE GIGLIO, JAMES 3203 MCDONALD STREET 6861 ORÁNGE DRIVE **DAVIE, FL 33314** COCONUT GROVE, FL 33133 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: JAMES GIGLIO 04/28/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ANDREWS, TERRANCE Name: Name: 3203 MCDONALD STREET Address: Address: City-St-Zip: COCONUT GROVE, FL 33133 City-St-Zip: Title: TSD () Delete Title: () Change () Addition Name: GIGLIO, JAMES Name: Address: 3203 MCDONALD STREET Address: City-St-Zip: COCONUT GROVE, FL 33133 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition SLIVANIK, STEPHANIE Name: PAYSEE, STEPHANIE Name: 3203 MCDONALD STREET Address: Address: 3203 MCDONALD STREET City-St-Zip: COCONUT GROVE, FL 33133 City-St-Zip: COCONUT GROVE, FL 33133 Title: () Delete Title: ( ) Change (X) Addition Name: Name: PAYSEE, MARIO 3203 MCDONALD STREET Address: Address: City-St-Zip: City-St-Zip: COCONUT GROVE, FL 33133

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: JAMES GIGLIO TSD 04/28/2009