

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 11, 2007 8:00 am
Secretary of State

07-11-2007 90074 045 ****70.00

DOCUMENT # N06000005243

1. Entity Name
LOFTS IN THE GROVE CONDOMINIUM ASSOCIATION, INC.



40124130

Principal Place of Business
2694-2695 INAGUA AVENUE
COCONUT GROVE, FL 33133

Mailing Address
2694-2695 INAGUA AVENUE
COCONUT GROVE, FL 33133

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

7600 W 20 AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 217

City & State

City & State

Hialeah FL

Zip

Country

Zip

Country

33016

USA

07032007

Chg-NP

CR2E037 (12/06)

4. FEI Number

59-2237280

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DELGADO, OSCAR J
7950 NW 155 STREET
SUITE 104
MIAMI LAKES, FL 33016

Name

Terra Association Management

Street Address (P.O. Box Number is Not Acceptable)

7600 W 20 AVE Suite 217

City

Hialeah

FL

Zip Code

33016

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

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 September 14, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete
NAME DELAGO, OSCAR J
STREET ADDRESS 2694-2695 INAGUA AVENUE
CITY-ST-ZIP COCONUT GROVE, FL 33133

TITLE President ☐ Change ☒ Addition
NAME Oliva, OTTO
STREET ADDRESS 7600 W 20 AVE suite 217
CITY-ST-ZIP Hialeah, FL 33016

TITLE VD ☒ Delete
NAME DELAGO, JOSE M
STREET ADDRESS 2694-2695 INAGUA AVENUE
CITY-ST-ZIP COCONUT GROVE, FL 33133

TITLE V-President ☐ Change ☒ Addition
NAME Elman Mark
STREET ADDRESS 7600 W 20 AVE suite 217
CITY-ST-ZIP Hialeah, FL 33016

TITLE STD ☒ Delete
NAME DEMAR, SUSAN
STREET ADDRESS 2694-2695 INAGUA AVENUE
CITY-ST-ZIP COCONUT GROVE, FL 33133

TITLE Secretary-Treasurer ☐ Change ☒ Addition
NAME Delgado, JOSE
STREET ADDRESS 7600 W 20 AVE suite 217
CITY-ST-ZIP Hialeah, FL 33016

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/3/07