

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009519

FILED
Apr 30, 2009
Secretary of State

Entity Name: GROVE VISTA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3234 MCDONALD STREET
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 331259
MIAMI, FL 33233

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHIMMEL, ROBERT L
3191 CORAL WAY, PH-2
MIAMI, FL 33145 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: P/D () Delete
Name: RAMIREZ, PATRICIA
Address: P.O. BOX 331259
City-St-Zip: MIAMI, FL 33233

Title: VP/D () Delete
Name: RAMIREZ, MARGOTH
Address: P.O. BOX 331259
City-St-Zip: MIAMI, FL 33233

Title: ST/D () Delete
Name: RAMIREZ, JANETH
Address: P.O. BOX 331259
City-St-Zip: MIAMI, FL 33233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: PATRICIA RAMIREZ

P/D

04/30/2009

Electronic Signature of Signing Officer or Director

Date