

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22421

FILED
Jan 11, 2010
Secretary of State

Entity Name: GRIFFIN ROAD 345 PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

19 WEST FLAGGLER ST.
SUITE 807
MIAMI, FL 33130 US

New Principal Place of Business:

19 WEST FLAGLER ST.
SUITE 807
MIAMI, FL 33130 US

Current Mailing Address:

PO BOX 820493
S FLORIDA, FL 330820493

New Mailing Address:

FEI Number: 65-0053171

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KNESKI, PAUL J
BISCAYNE BUILDING - SUITE 807
19 WEST FLAGLER STREET
MIAMI, FL 33130 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
Name: ZIMMERMAN, ROBERT
Address: 18901 SW 51ST MANOR
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: S
Name: MCCONNON, DELLYN
Address: 18951 SW 57 COURT
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: D
Name: DISCIPPIO, WILLIAM
Address: 5961 SW 190 AVE
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: T
Name: ARLOTTA, OFELIA
Address: 19100 SW 59TH STREET
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: VP
Name: ARMAS, LILIANA
Address: 18900 SW 53 ST
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: D
Name: EVANS, JAY
Address: 18951 S.W. 51 MANOR
City-St-Zip: SOUTHWEST RANCHES, FL 33332

I hereby 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 all other like empowered.

SIGNATURE: OFELIA ARLOTTA

T

01/11/2010

Electronic Signature of Signing Officer or Director

Date