2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23351

FILED Apr 21, 2009 Secretary of State

Entity Name: CALIFORNIA GROVE HOMES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 20038 NE 6TH COURT CIRCLE NORTH MIAMI BEACH, FL 33179 LIS **Current Mailing Address: New Mailing Address:** P.O. BOX 69-5200 609 IVES DAIRY ROAD NORTH MIAMI BEACH, FL 33179 MIAMI, FL 33269 FEI Number: 65-0052281 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TUNINSKAYA, GALINA 20001 NE 6TH COURT CIRCLE NORTH MIAMI BEACH, FL 33179 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: PD () Delete () Change () Addition JAN, BAK C Name: Name: Address: 20034 NE 6 CT CIR Address: City-St-Zip: N MIAMI BEACH, FL 33179 City-St-Zip: Title: Title: () Delete () Change () Addition Name: DORVIL, JACK Name: Address: 20020 NE 6TH CT CIRCLE Address: City-St-Zip: NORTH MIAMI BEACH, FL 33179 City-St-Zip: Title: () Delete Title: () Change () Addition TUNINSKAYA, GALINA Name: Name: Address: 20001 N E 6 CT CIR Address: City-St-Zip: N MIAMI BCH, FL 33179 City-St-Zip: Title: PD () Delete Title: () Change () Addition Name: BIANCHI, MARIANO Name: Address: 20017 NE 6TH CT CIRCLE Address: City-St-Zip: MIAMI, FL 33179 City-St-Zip: Title: PD () Delete Title: PD (X) Change () Addition BEAMER, MONICA GJEMSO, NANCY Name: Name: 20003 NE 6 CT CIR 20007 NE 6 CT CIR Address: Address: NORTH MIAMI BEACH, FL 33179 City-St-Zip: City-St-Zip: NORTH MIAMI BEACH, FL 33179

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: GALINA TUNINSKAYA V.P. 04/21/2009