2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30972

FILED May 01, 2006 Secretary of State

Entity Name: OLD CUTLER GROVES NORTH HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:	
13824 SW MIAMI, FL			
Current Mailing Address:		New Mailing Address:	
1731 COL	N MITCHELL CONIAL DR COVE SPRINGS, FL 32043 US		
In accordar	r: 65-0150012 FEI Number Applied For() FEI loce with s. 607.193(2)(b), F.S., the corporation did not received Address of Current Registered Agent:	•	
RINGEL, 6732 SW MIAMI, FL	139TH STREET		
	e named entity submits this statement for the purpos te of Florida.	e of changing	its registered office or registered agent, or both
SIGNATU			
	Electronic Signature of Registered Agent		Date
OFFICER	S AND DIRECTORS:	ADDITIO	NS/CHANGES TO OFFICERS AND DIRECTO
Title: Name: Address: City-St-Zip:	D () Delete STARK, MARGITA 6753 S.W. 138TH STREET MIAMI, FL 33158	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	D () Delete GUILERMO, CASTRO 6711 S.W. 138TH STREET MIAMI, FL 33158 US	Title: Name: Address: City-St-Zip:	D (X) Change () Addition TONY, UPSHAW 13836 SW 67 PL MIAMI, FL 33158 US
Title: Name: Address: City-St-Zip:	D () Delete KRISS, RONALD 6723 SW 138 STREET MIAMI, FL 33158	Title: Name: Address: City-St-Zip:	() Change () Addition
	T () Delete	Title:	() Change () Addition
Title: Name: Address: City-St-Zip:	MITCHELL, SUSAN E 1731 COLONIAL DR GREEN COVE SPRINGS, FL 32043 US	Name: Address: City-St-Zip:	
Name: Address:	MITCHELL, SUSAN E 1731 COLONIAL DR	Address:	()Change ()Addition

I hereby certify that the information supplied with this filing does not qualify for the 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: SUSAN E MITCHELL T 05/01/2006