2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2009
Secretary of State

DOCUMENT# N37030

Entity Name: CHRISTOPHER GROVES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8496 SW 94TH STREET
MIAMI, FL 33156 US

New Principal Place of Business:

Current Mailing Address:

8496 SW 94TH STREET
MIAMI, FL 33156 US

New Mailing Address:

FEI Number: 65-0320560 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DIAZ DE VILLEGAS, ELENA
12260 SW 8TH ST
SUITE 224
MIAMI, FL 33184 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: D ( ) Delete
Name: DIAZ DE VILLEGAS, ELENA
Address: 8480 SW 94 ST
City-St-Zip: MIAMI, FL 33156

Title: PD ( ) Delete
Name: NUNEZ, ARSENIO
Address: 8496 SW 94TH STREET
City-St-Zip: MIAMI, FL 33156

Title: TD ( ) Delete
Name: ALEMAN, ARMANDO P
Address: 8480 SW 94 ST
City-St-Zip: MIAMI, FL 33156

Title: D ( ) Delete
Name: NEVES, GILBERTO
Address: 8488 SW 94TH STREET
City-St-Zip: MIAMI, FL 33156

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:

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: ARSENIO NUNEZ PD 01/08/2009

Electronic Signature of Signing Officer or Director — Date