2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400006009

FILED Mar 04, 2010 Secretary of State

Entity Name: THE GROVES AT OLD CUTLER HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

8200 SW 170 STREET 9000 SW 152 STREET

PALMETTO BAY, FL 33157 US SUITE 102

PALMETTO BAY, FL 33157 US

Current Mailing Address: New Mailing Address:

300 ARAGON AVENUE 9000 SW 152 STREET

SUITE 210 SUITE 102

CORAL GABLES, FL 33134 US PALMETTO BAY, FL 33157 US

FEI Number: 65-0715094 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:

GORAN, WILLIAM T GORAN, WILLIAM T

95 MERRICK WAY 9130 SOUTH DADELAND BLVD.

SUITE 610 SUITE 1500

CORAL GABLES, FL 33134 US MIAMI, FL 33156 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: 03/04/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

 Name:
 SCHWARTZ, STEVEN J

 Address:
 8166 SW 171 TERRACE

 City-St-Zip:
 PALMETTO BAY, FL 33157 US

Title: VPD

 Name:
 BETTY, AMOS-RIGHETTI

 Address:
 8206 SW 171 TERRACE

 City-St-Zip:
 PALMETTO BAY, FL 33157 US

Title: TD

 Name:
 WALLER, BRADLEY G

 Address:
 8081 SW 172 TERRACE

 City-St-Zip:
 PALMETTO BAY, FL 33157 US

Title: SD

 Name:
 BRUMM, ARON H

 Address:
 8109 SW 173 TERRACE

 City-St-Zip:
 PALMETTO BAY, FL 33157 US

Title: [

 Name:
 PHILIP, WALSH

 Address:
 8108 SW 172 TERRACE

 City-St-Zip:
 PALMETTO BAY, FL 33157

Title: [

 Name:
 HUNTSMAN, BRIAN

 Address:
 8204 SW 171 STREET

 City-St-Zip:
 PALMETTO BAY, FL 33157

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: STEVEN SCHWARTZ P 03/04/2010