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TALLAHASSEE, FLORIDA

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NONPROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N97000000402

1. Corporation Name  
THE GROVES AT KENDALE LAKES CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business  
8818 S.W. 72ND STREET  
APARTMENT F-136  
MIAMI FL 33173

Mailing Address  
8818 S.W. 72ND STREET  
APARTMENT F-136  
MIAMI FL 33173



21	2. Principal Place of Business Bldg., Apt. #, etc.	26	2a. Mailing Address Bldg., Apt. #, etc.	3.	Date Incorporated or Qualified 01/27/1997
22	City & State	27	City & State	4.	FBI Number 65-0072891
23	Zip	28	Country	5.	Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
24	Country	29	Country	6.	Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
SIGEL, PHILIP 8818 SW 72 ST F 136 SUITE 3000 MIAMI FL 33173		81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	

11. Pursuant to the provisions of Sections 617.0902 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: *Philip Sigel* DATE: 1/21/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D SIGEL, PHILIP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SIGEL, PHILIP	1.2 NAME	
STREET ADDRESS	27 TAHITI BEACH ISLAND ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL 33143	1.4 CITY-ST-ZIP	
TITLE	D ERACE, DIANE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ERACE, DIANE	2.2 NAME	
STREET ADDRESS	12883 S.W. 91ST COURT	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33176	2.4 CITY-ST-ZIP	
TITLE	D HORT, M F	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HORT, M F	3.2 NAME	
STREET ADDRESS	8818 S.W. 72ND STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33173	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Philip Sigel* DATE: 1/21/99

305 271-7717

CRCE037 (1/98)