

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000003192

**FILED**  
**Jan 16, 2013**  
**Secretary of State**  
**CC5672802167**

**Entity Name:** DIXIE GROVE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2630 SW 28TH STREET, UNIT 61B  
COCONUT GROVE, FL 33133

**Current Mailing Address:**

2630 SW 28TH STREET, UNIT 61B  
COCONUT GROVE, FL 33133

**FEI Number:** 20-1638219

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

RUA, OMAIDA PD  
2630 SW 28TH STREET  
UNIT 61  
COCONUT GROVE, FL 33133 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

**Officer/Director Detail :**

Title PD  
Name RUA, OMAIDA PD  
Address 2630 SW 28TH STREET  
City-State-Zip: COCONUT GROVE FL 33133

Title VPD  
Name RUA, CHARLIE O  
Address 2630 SW 28TH STREET  
City-State-Zip: COCONUT GROVE FL 33133

Title D  
Name HUBBARD, WILLIAM  
Address 2630 SW 28TH STREET  
City-State-Zip: COCONUT GROVE FL 33133

Title D  
Name JONES, RICO  
Address 2630 SW 28TH STREET  
City-State-Zip: COCONUT GROVE FL 33133

Title D  
Name ACIKGOZ, NASIR  
Address 2630 SW 28TH STREET  
City-State-Zip: COCONUT GROVE FL 33133

*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:** OMAIDA RUA

**PRESIDENT**

**01/16/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date