## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004312

Entity Name: GROVENOR HOUSE CONDOMINIUM ASSOCIATION, INC.

**FILED** Jan 03, 2019 **Secretary of State** CC8496328662

## **Current Principal Place of Business:**

2627 SOUTH BAYSHORE DRIVE COCONUT GROVE. FL 33133

## **Current Mailing Address:**

2627 SOUTH BAYSHORE DRIVE COCONUT GROVE. FL 33133

FEI Number: 72-1598392 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SKRLD, INC.

201 ALHAMBRA CIRCLE, 11TH FLOOR CORAL GABLES, FL 33134 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: GARY MARS, ESQ. 01/03/2019

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title VΡ

ALCANTARA, JEAN-PAUL Name Name BARNETT, STANLEY

2627 SOUTH BAYSHORE DRIVE 2627 SOUTH BAYSHORE DRIVE Address Address

MANAGEMENT OFFICE MANAGEMENT OFFICE

City-State-Zip: COCONUT GROVE FL 33133 City-State-Zip: COCONUT GROVE FL 33133

Title **SECRETARY** Title **TREASURER** 

Name MOSKO, MARC Name ROSEBOROUGH, RUDOLPH

2627 SOUTH BAYSHORE DRIVE 2627 SOUTH BAYSHORE DRIVE Address Address

MANAGEMENT OFFICE COCONUT GROVE FL 33133

City-State-Zip: COCONUT GROVE FL 33133 City-State-Zip:

Title **DIRECTOR** 

Name PABON, CARLOS

Address 2627 SOUTH BAYSHORE DRIVE

MANAGEMENT OFFICE

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: JEAN-PAUL G.ALCANTARA

**PRESIDENT** 

01/03/2019