

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000006009

**FILED**  
**Feb 13, 2023**  
**Secretary of State**  
**5956644929CC**

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

**Current Principal Place of Business:**

9000 SW 152 STREET  
SUITE 102  
PALMETTO BAY, FL 33157

**Current Mailing Address:**

9000 SW 152 STREET  
SUITE 102  
PALMETTO BAY, FL 33157 US

**FEI Number: 65-0715094**

**Certificate of Status Desired: No**

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

GORAN, WILLIAM T  
9130 SOUTH DADELAND BLVD.  
SUITE 1500  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           DIRECTOR  
Name           SCHWARTZ, STEVEN  
Address        9000 SW 152 STREET  
                  SUITE 102  
City-State-Zip: PALMETTO BAY FL 33157

Title           TREASURER  
Name           HOSSEINI, HAMID  
Address        9000 SW 152 STREET  
                  SUITE 102  
City-State-Zip: PALMETTO BAY FL 33157

Title           DIRECTOR  
Name           GORAN, WILLIAM  
Address        9000 SW 152 STREET  
                  SUITE 102  
City-State-Zip: PALMETTO BAY FL 33157

Title           VP  
Name           PITTMAN, STEVE  
Address        9000 SW 152 STREET  
                  SUITE 102  
City-State-Zip: PALMETTO BAY FL 33157

Title           SECRETARY  
Name           PADILLA, DAVID  
Address        9000 SW 152ND STREET  
                  102  
City-State-Zip: MIAMI FL 33157

Title           PRESIDENT  
Name           MILLER, CHARLES  
Address        9000 SW 152ND STREET  
                  102  
City-State-Zip: MIAMI 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: CHARLES MILLER**

**PRESIDENT**

**02/13/2023**

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

\_\_\_\_\_  
Date