

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23100

FILED  
Mar 28, 2011  
Secretary of State

Entity Name: VILLAGE OF DORAL DUNES ASSOCIATION, INC.

**Current Principal Place of Business:**

UNLIMITED PROPERTY MANAGEMENT  
7655 NW 50 STREET  
MIAMI, FL 33166

**New Principal Place of Business:**

UNLIMITED PROPERTY MANAGEMENT  
7665 NW 50 STREET  
MIAMI, FL 33166

**Current Mailing Address:**

UNLIMITED PROPERTY MANAGEMENT  
7655 NW 50 STREET  
MIAMI, FL 33166

**New Mailing Address:**

UNLIMITED PROPERTY MANAGEMENT  
7665 NW 50 STREET  
MIAMI, FL 33166

FEI Number: 66-0052606

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

UPM  
7655 NW 50 STREET  
MIAMI, FL 33166 US

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

PEREZ-SIAM, FRANK ESQ.  
7001 SW 87 COURT  
MIAMI, FL 33173 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: FRANK PEREZ-SIAM

03/28/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MENENDEZ, ALFRED  
Address: 7665 NW 50 STREET  
City-St-Zip: MIAMI, FL 33166

Title: VP  
Name: HADAD, ALEJANDRO  
Address: 7665 NW 50 STREET  
City-St-Zip: MIAMI, FL 33166

Title: T  
Name: TELLECHEA, GABRIEL  
Address: 7665 NW 50 STREET  
City-St-Zip: MIAMI, FL 33166

Title: S  
Name: GARCIA, JOSE  
Address: 7665 NW 50 STREET  
City-St-Zip: MIAMI, FL 33166

Title: D  
Name: CESAR, LUIZ  
Address: 7665 NW 50 STREET  
City-St-Zip: MIAMI, FL 33166

Title: D  
Name: ROBINSON, CRAIG  
Address: 7665 NW 50 STREET  
City-St-Zip: MIAMI, FL 33166

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: ALFRED MENEDEZ

P

03/28/2011

Electronic Signature of Signing Officer or Director

Date