

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 15, 2009
Secretary of State

DOCUMENT# N38555

Entity Name: TOWNHOMES OF DORAL PLACE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**4600 N.W. 102 AVENUE
DORAL, FL 33186 US**New Principal Place of Business:****Current Mailing Address:**% ALLIED PROPERTY GROUP, INC,%DANNY VARGAS
12350 S.W. 132 COURT
MIAMI, FL 33186**New Mailing Address:**% ALLIED PROPERTY GROUP, INC,%JIMMY RIVERO
12350 S.W. 132 CT. STE. 114
MIAMI, FL 33186**FEI Number:** 65-0243857**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BECKER & POLIAKOFF PA
121 ALHABRA PLAZA
10TH FL
CORAL GABLES, FL 33134 US**Name and Address of New Registered Agent:**

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**OFFICERS AND DIRECTORS:**Title: PD () Delete
Name: MONTEAGUDO, ISELA
Address: 4500 NW 102 COURT
City-St-Zip: MIAMI, FL 33178Title: SD () Delete
Name: FRANKEL, PABLO
Address: 4601 NW 102 COURT
City-St-Zip: MIAMI, FL 33178Title: TD () Delete
Name: DE LOS RIOS, MERCEDES
Address: 4490 NW 102 COURT
City-St-Zip: MIAMI, FL 33178Title: () Delete
Name:
Address:
City-St-Zip:Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PD (X) Change () Addition
Name: BECERRA, FERNANDO
Address: 10207 NW 44 TERRACE
City-St-Zip: MIAMI, FL 33178Title: SD (X) Change () Addition
Name: NEGRON, NESTOR
Address: 4610 NW 102 PLACE
City-St-Zip: MIAMI, FL 33178Title: TD (X) Change () Addition
Name: MONTEAGUDO, ISELA
Address: 4500 NW 102 CT.
City-St-Zip: MIAMI, FL 33178Title: VP () Change (X) Addition
Name: DOS SANTOS, JOSE SERGIO
Address: 10286 NW 46 ST.
City-St-Zip: DORAL, FL 33178Title: D () Change (X) Addition
Name: BRETANA, MARIA
Address: 4501 NW 102 COURT
City-St-Zip: DORAL, FL 33178

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: FERNANDO BECERRA

PD

06/15/2009

Electronic Signature of Signing Officer or Director_____
Date