

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001178

FILED
Apr 28, 2006
Secretary of State

Entity Name: DORAL LANDINGS TOWNHOMES ASSOCIATION, INC.

Current Principal Place of Business:

GUARANTEE MANAGEMENT
6925 NW 42 STREET
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

GUARANTEE MANAGEMENT
6925 NW 42 STREET
MIAMI, FL 33166

New Mailing Address:

FEI Number: 59-3367201 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKRLD, INC.
201 ALHAMBRA CIRCLE, SUITE 1102
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: ROLAND, SANGUINO
Address: 11608 NW 51 TERR
City-St-Zip: MIAMI, FL 33178

Title: VPD () Delete
Name: SILVA, CARLOS
Address: 5132 N.W. 114 COURT
City-St-Zip: MIAMI, FL 33178

Title: TD () Delete
Name: ARRARTE, RAUL
Address: 5068 N.W. 114 PLACE
City-St-Zip: MIAMI, FL 33178

Title: SD () Delete
Name: ZULUAGA, JORGE
Address: 11501 N.W. 50 TERRACE
City-St-Zip: MIAMI, FL 33178

Title: D () Delete
Name: TREVINO, JUAN A
Address: 11428 N.W. 50 TERRACE
City-St-Zip: MIAMI, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: TREVINO, JUAN A
Address: 11428 N.W. 50TH TERRACE
City-St-Zip: MIAMI, FL 33178

Title: TD (X) Change () Addition
Name: SILVA, CARLOS
Address: 5132 N.W. 114TH COURT
City-St-Zip: MIAMI, FL 33178

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: ARRARTE, RAUL
Address: 5068 N.W. 114TH PLACE
City-St-Zip: MIAMI, FL 33178

I hereby certify that the information supplied with this filing does not qualify for the 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: ROLAND SANGUINO

PD

04/28/2006

Electronic Signature of Signing Officer or Director

Date