

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762284

Entity Name: DORAL COLONY HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**10705 NW 33RD STREET,
SUITE 100
DORAL, FL 33172**Current Mailing Address:**10705 NW 33RD STREET,
SUITE 100
DORAL, FL 33172**FEI Number:** 59-2245305**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SRHL, INC.
201 ALHAMBRA CIRCLE
STE 1102
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:** JONATHAN M. MOFSKY

03/21/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name JONES, JESSE A
Address 5117 NW 93 DORAL WAY
City-State-Zip: DORAL FL 33178

Title DIRECTOR
Name TRYBULSKI , EDMUND
Address 9352 NW 48TH DORAL TERRACE
City-State-Zip: DORAL FL 33178

Title SECRETARY
Name BLOCK, MARTHA
Address 9344 NW 48 DORAL TERR
City-State-Zip: DORAL FL 33178

Title VP
Name MERCADE, ROBERTO
Address 5121 NW 93 DORAL WAY
City-State-Zip: DORAL FL 33178

Title DIRECTOR
Name WEISBURD, SCOTT
Address 9317 NW 48 DORAL TERRACE
City-State-Zip: DORAL FL 33178

Title TREASURER
Name PALLARES, FERNANDO
Address 9313 NW 48 DORAL TERRACE
City-State-Zip: DORAL FL 33178

Title DIRECTOR
Name SPANGARO, CLAUDIA
Address 9319 NW 50 DORAL CIRCLE SOUTH
City-State-Zip: DORAL FL 33178

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: JESSE JONES

PRESIDENT

03/21/2016

Electronic Signature of Signing Officer/Director Detail

Date