

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000010914

**FILED**  
**Mar 04, 2013**  
**Secretary of State**  
**CC4574740831**

**Entity Name:** WINDWARD AT ISLANDS AT DORAL NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

12350 SW 132 COURT  
SUITE 114  
MIAMI, FL 33186

**Current Mailing Address:**

12350 SW 132 COURT  
SUITE 114  
MIAMI, FL 33186

**FEI Number: 20-0732155**

**Certificate of Status Desired: No**

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

EISINGER, ESQ., DENNIS  
4000 HOLLYWOOD BLVD.  
SUITE #265S  
HOLLYWOOD, FL 33021 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 PD  
Name CANCHOLA, ELIZABETH  
Address 12350 SW 132 COURT #114  
City-State-Zip: MIAMI FL 33186

Title VPD  
Name ARCELUS, DELIA G  
Address 12350 SW 132 COURT #114  
City-State-Zip: MIAMI FL 33186

Title TD  
Name SCHWARZ, CARLOS  
Address 12350 SW 132 COURT #114  
City-State-Zip: MIAMI FL 33186

Title SD  
Name RUBI, ANISBEL  
Address 12350 SW 132 COURT #114  
City-State-Zip: MIAMI FL 33186

Title D  
Name COLLINS, RAYMOND  
Address 12350 SW 132 COURT #114  
City-State-Zip: MIAMI FL 33186

*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: ELIZABETH CANCHOLA**

**PRESIDENT**

**03/04/2013**

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

\_\_\_\_\_  
Date