

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000003450

**FILED**  
**Apr 16, 2014**  
**Secretary of State**  
**CC3275038992**

**Entity Name:** DONLIN DRIVE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O BANYAN PROPERTY MGMT  
3900 WOODLAKE BLVD SUITE 309  
LAKE WORTH , FL 33463

**Current Mailing Address:**

C/O BANYAN PROPERTY MGMT  
3900 WOODLAKE BLVD SUITE 309  
LAKE WORTH , FL 33463 US

**FEI Number: 06-1725941**

**Certificate of Status Desired: No**

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

KRAIT LAW  
7000 W PALMETTO PARK ROAD  
SUITE 210  
BOCA RATON, FL 33433 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: COREY KRAIT**

**04/16/2014**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name ORTIZ, WILFREDO  
Address C/O BANYAN PROPERTY MGMT  
3900 WOODLAKE BLVD SUITE 309  
City-State-Zip: LAKE WORTH FL 33463

Title VP  
Name LEE , KEISHA  
Address C/O BANYAN PROPERTY MGMT  
3900 WOODLAKE BLVD SUITE 309  
City-State-Zip: LAKE WORTH FL 33463

Title SD  
Name ZUMPARO, DON  
Address C/O BANYAN PROPERTY MGMT  
3900 WOODLAKE BLVD SUITE 309  
City-State-Zip: LAKE WORTH FL 33463

Title DIRECTOR  
Name GALLO, JORDAN  
Address C/O BANYAN PROPERTY MGMT  
3900 WOODLAKE BLVD SUITE 309  
City-State-Zip: LAKE WORTH FL 33463

Title TD  
Name YSAGUIRRE, CARLOS  
Address C/O BANYAN PROPERTY MGMT  
3900 WOODLAKE BLVD SUITE 309  
City-State-Zip: LAKE WORTH FL 33463

Title DIRECTOR  
Name GORMLEY , TED  
Address C/O BANYAN PROPERTY MGMT  
3900 WOODLAKE BLVD SUITE 309  
City-State-Zip: LAKE WORTH FL 33463

Title DIR  
Name TRACEY , JASON  
Address C/O BANYAN PROPERTY MGMT  
3900 WOODLAKE BLVD SUITE 309  
City-State-Zip: LAKE WORTH FL 33463

*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: WILFREDO ORTIZ**

**PD**

**04/16/2014**

Electronic Signature of Signing Officer/Director Detail

Date