

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 27, 2015
Secretary of State
CC1808676966

Entity Name: DOWNTOWN NEIGHBORS ALLIANCE, INC.

Current Principal Place of Business:

ROSA M DE LA CAMARA, ESQ.
121 ALHAMBRA PLAZA, 10TH FL
CORAL GABLES, FL 33134

Current Mailing Address:

ROSA M DE LA CAMARA, ESQ.
121 ALHAMBRA PLAZA, 10TH FL
CORAL GABLES, FL 33134

FEI Number: 47-1315285

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DE LA CAMARA, ROSA M ESQ
121 ALHAMBRA PLAZA, 10TH FL
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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name LAGOA, DALIA
Address 121 ALHAMBRA PLAZA, 10TH FL
City-State-Zip: CORAL GABLES FL 33134

Title PRESIDENT
Name PINA, DAVID
Address 121 ALHAMBRA PLAZA, 10TH FL
City-State-Zip: CORAL GABLES FL 33134

Title SECRETARY
Name PISANA, PASQUALE
Address 121 ALHAMBRA PLAZA, 10TH FL
City-State-Zip: CORAL GABLES FL 33134

Title TREASURER
Name BENOSH, ITAI
Address 121 ALHAMBRA PLAZA, 10TH FL
City-State-Zip: CORAL GABLES FL 33134

Title EXECUTIVE DIRECTOR
Name JAIN, AVRA
Address 121 ALHAMBRA PLAZA, 10TH FL
City-State-Zip: CORAL GABLES FL 33134

Title EXECUTIVE DIRECTOR
Name STERN, RUTH
Address 121 ALHAMBRA PLAZA, 10TH FL
City-State-Zip: CORAL GABLES FL 33134

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: ITAI BENOSH

TREASURER

04/27/2015

Electronic Signature of Signing Officer/Director Detail

Date