

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000001403

**Entity Name:** NEOVITA DORAL SINGLE FAMILY RESIDENCES COMMUNITY ASSOCIATION, INC.

**FILED**  
**Mar 11, 2022**  
**Secretary of State**  
**4129813374CC**

**Current Principal Place of Business:**

8200 NW 33 STREET #300  
MIAMI, FL 33178

**Current Mailing Address:**

C/O ASSOCIATION SERVICES OF FLORIDA  
10112 USA TODAY WAY  
MIMAMAR, FL 33025 US

**FEI Number: 82-1320566**

**Certificate of Status Desired: No**

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

GOEDE, ADAMCZYK, DEBOEST & CROSS, LLC  
2600 DOUGLAS ROAD  
SUITE 717  
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:** GOEDE, ADAMCZYK, DEBOEST & CROSS, PLLC

03/11/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name FREYRE, JUAN CARLOS  
Address 8200 NW 33 STREET #300  
City-State-Zip: MIAMI FL 33178

Title VP  
Name MONTES , IGNACIO  
Address 8200 NW 33 STREET #300  
City-State-Zip: MIAMI FL 33178

Title STD  
Name ONETTO, RAIMUNDO  
Address 8200 NW 33 STREET #300  
City-State-Zip: MIAMI 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:** JUAN CARLOS FREYRE

**PRESIDENT**

03/11/2022

Electronic Signature of Signing Officer/Director Detail

Date