DOCUMENT# N23100

Entity Name: VILLAGE OF DORAL DUNES ASSOCIATION, INC.

## **Current Principal Place of Business:**

THE VILLAGE OF DORAL DUNES ASSOCIATION, INC. 10200 NW 43 TERRACE DORAL, FL 33178

## **Current Mailing Address:**

1500 NW 89 COURT, SUITE 202 SUITE 202 DORAL, FL 33172 US

## FEI Number: 66-0052606

## Name and Address of Current Registered Agent:

ZACIEWSKI, SHAUN M. 175 SW 7TH STREET **SUITE 1611** MIAMI, FL 33130 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:	SHAUN M. ZACIEWSKI, ESQ.			03/12/2024	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title F	PRESIDENT	Title	VICE PRESIDENT		
Name A	ALVAREZ, RAFAEL ALBERTO	Name	SCHREIBMAIER, EMANUEL		
	1500 NW 89 COURT SUITE 202	Address	1500 NW 89 COURT SUITE 202		
City-State-Zip:	DORAL FL 33172	City-State-Zip:	DORAL FL 33172		
Title	SECRETARY AND TREASURER	Title	DIRECTOR		
Name E	BARGELLINI, GIORGIO	Name	DONADIO, CLAUDIA		
	1500 NW 89 COURT SUITE 202	Address	1500 NW 89 COURT SUITE 202		
City-State-Zip:	DORAL FL 33172	City-State-Zip:	DORAL FL 33172		
Title	DIRECTOR				
Name 0	GUERRERO, CRISTOPHER				
	1500 NW 89 COURT SUITE 202				
City-State-Zip:	DORAL FL 33172				

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	RAFAEL ALBERTO ALVAREZ	PRESIDENT	03/12/2024
	Electronic Signature of Signing Officer/Director Detail		Date

Certificate of Status Desired: No