2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2017
Secretary of State
CC9318793820

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Entity Name: TOWNHOMES OF DORAL PLACE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O RENOVATIONS PROPERTY MANAGEMENT
8000 NW 7 ST 204
MIAMI, FL 33126

Current Mailing Address:

C/O RENOVATIONS PROPERTY MANAGEMENT
8000 NW 7 ST 204
MIAMI, FL 33126 US

FEI Number: 65-0243857

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF PA
121 ALHABRA 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	PRESIDENT	Title	SECRETARY
Name	VINUEZA, MARIA D	Name	HARRELL, FREDERICK K
Address	C/O RENOVATIONS PROPERTY MANAGEMENT 8000 NW 7 ST 204	Address	C/O RENOVATIONS PROPERTY MANAGEMENT 8000 NW 7 ST 204
City-State-Zip:	MIAMI FL 33126	City-State-Zip:	MIAMI FL 33126
Title	VP	Title	TREASURER
Name	MARTINEZ, GUSTAVO	Name	BRITO, FRANCISCO G
Address	C/O RENOVATIONS PROPERTY MANAGEMENT 8000 NW 7 ST 204	Address	C/O RENOVATIONS PROPERTY MANAGEMENT 8000 NW 7 ST 204
City-State-Zip:	MIAMI FL 33126	City-State-Zip:	MIAMI FL 33126
Title	DIRECTOR	Title	DIRECTOR
Name	FALOSSI, CLAUDIO	Name	NEGRON, NESTOR
Address	C/O RENOVATIONS PROPERTY MANAGEMENT 8000 NW 7 ST 204	Address	C/O RENOVATIONS PROPERTY MANAGEMENT 8000 NW 7 ST 204
City-State-Zip:	MIAMI FL 33126	City-State-Zip:	MIAMI FL 33126
Title	DIRECTOR		
Name	MEZA, LUIS		
Address	C/O RENOVATIONS PROPERTY MANAGEMENT 8000 NW 7 ST 204		
City-State-Zip:	MIAMI FL 33126		

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: VINUEZA , MARIA D P 04/29/2017

Electronic Signature of Signing Officer/Director Detail Date