2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002823

FILED Feb 24, 2009 Secretary of State

Entity Name: MEDITERRANEAN AT ISLANDS AT DORAL NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2680 NW 97 AVE. 10705 N.W. 33RD STREET

DORAL, FL 33172 SUITE 100

DORAL, FL 33172

Current Mailing Address: New Mailing Address:

10705 N.W. 33RD STREET 2680 NW 97 AVE

DORAL, FL 33172 SUITE 100

DORAL, FL 33172

FEI Number: 13-4247088 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DORAL MANAGEMENT M & A DORAL 2680 NW 97TH AVE. 10705 N.W. 33RD STREET

DORAL, FL 33172 SUITE 100

DORAL, FL 33172 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: DELIA G. ARCELUS 02/24/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

FUENTES, TANYA M PIQUERO, FERNANDO Name: Name: 10837 NW 85 TER Address: 10804 NW, 84 ST Address: City-St-Zip: MIAMI, FL 33178 City-St-Zip: DORAL, FL 33178

Title: Title: () Delete () Change () Addition

LOPEZ, ANGEL Name: Name: Address: 10803 NW 84 LN Address: City-St-Zip: DORAL, FL 33178 City-St-Zip:

Title: () Delete Title: () Change () Addition

SIMON, JORGE Name: Name: 10824 NW 84 ST Address: Address: City-St-Zip: DORAL, FL 33178 City-St-Zip:

() Delete Title: Title: () Change () Addition

RODRIGUEZ, MARTIN Name: Name: 8519 NW 109 CT Address: Address: City-St-Zip: DORAL, FL 33178 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

PIQUERO, FERNANDO ALVARADO, ZULEMA Name: Name: 10804 NW 84ST 8599 NW 108 CT Address: Address: City-St-Zip: DORAL, FL 33178 City-St-Zip: DORAL, FL 33178

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: FERNANDO PIQUERO Ρ 02/24/2009