

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03762

FILED
Apr 11, 2012
Secretary of State

Entity Name: THE DORAL AT PARK FOREST, INC.

Current Principal Place of Business:

187 FOREST LAKES DRIVE
NAPLES, FL 34105 US

New Principal Place of Business:

Current Mailing Address:

187 FOREST LAKES DRIVE
NAPLES, FL 34105 US

New Mailing Address:

FEI Number: 59-2712642

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRACEY, ROBERT T SR.
187 FOREST LAKES BLVD
NAPLES, FL 33942 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D
Name: LOVEALL, RICHARD
Address: 201 QUAIL FOREST BLVD
City-St-Zip: NAPLES, FL 34105

Title: PD
Name: HILLSON, RAYMOND
Address: 201 QUAIL FOREST BLVD #307
City-St-Zip: NAPLES, FL 34105

Title: D
Name: ALTMAN, JEAN
Address: 201 QUAIL FOREST BLVD.
City-St-Zip: NAPLES, FL

Title: ST
Name: GRACEY, ROBERT T.
Address: 187 FOREST LAKES BLVD
City-St-Zip: NAPLES, FL

Title: D
Name: RODENROTH, HELENE
Address: 151 QUAIL FOREST BLVD. #204
City-St-Zip: NAPLES, FL 34105

Title: VPD
Name: DECKARD, GARY
Address: 201 QUAIL FOREST BLVD. #204
City-St-Zip: NAPLES, FL 34105

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: ROBERT T. GRACEY, SR.

SECY

04/11/2012

Electronic Signature of Signing Officer or Director

_____ Date