2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N05000009491

TI FILED
Oct 02, 2007
Secretary of State

Entity Name: ENCLAVE AT DORAL CONDOMINIUM NO. 2 ASSOCIATION, INC.

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

730 NW 107TH AVENUE SUITE 400 4300 NW 107TH AVENUE

MIAMI, FL 33172 MIAMI, FL 33178

Current Mailing Address: New Mailing Address:

C/O THE CONTINENTAL GROUP, INC. 11981 SW 144 COURT, STE. 201 MIAMI, FL 33186

FEI Number: 20-3485441 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:

JEFFREY R. MARGOLIS, P.A.

C/O DUANE MORRIS LLP

200 SOUTH BISCAYNE BLVD., SUITE 3400

ASSOCIATION LAW GROUP, P.L.
1666 KENNEDY CAUSEWAY
SUITE 305

MIAMI, FL 33131 US SOTTE 3400 SOTTE 3400 NORTH BAY VILLAGE, FL 33141 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: DAVID ARNOLD 10/02/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 HENDERSON, MERCEDES
 Name:
 RODAS, LUIS

 Address:
 730 NW 107TH AVENUE SUITE 400
 Address:
 4300 NW 107TH AVENUE

City-St-Zip: MIAMI, FL 33172 City-St-Zip: MIAMI, FL 33178

Title: DVPS () Delete Title: DVP (X) Change () Addition Name: MCPHERSON, GREG Name: FERNANDEZ, JORGE

Address: 730 NW 107TH AVENUE SUITE 400 Address: 4300 NW 107TH AVENUE City-St-Zip: MIAMI, FL 33172 City-St-Zip: MIAMI, FL 33172

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

 Name:
 AVILA, MIGUEL
 Name:
 SEBASTIANI, JUAN

 Address:
 730 NW 107TH AVENUE SUITE 400
 Address:
 4300 NW 107TH AVENUE

 City-St-Zip:
 MIAMI, FL 33172
 City-St-Zip:
 MIAMI, 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: LUIS RODAS DP 10/02/2007