

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Sep 27, 2012  
Secretary of State**

DOCUMENT# N10000003325

**Entity Name:** DORAL COMMUNITY COALITION, INC.**Current Principal Place of Business:**11381 NW 64TH TERRACE  
DORAL, FL 33124**New Principal Place of Business:**2656 NW 97 AVE  
DORAL, FL 33172**Current Mailing Address:**11381 NW 64TH TERRACE  
DORAL, FL 33124**New Mailing Address:**PO BOX 228223  
DORAL, FL 33222**FEI Number:** 27-2282569**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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:** CCD  
**Name:** JONES, JESSE  
**Address:** 5117 NW 93RD DORAL WAY  
**City-St-Zip:** DORAL, FL 33178**Title:** SD  
**Name:** MAZZOLA, CHRISTIAN  
**Address:** 4417 NW 93RD DORAL COURT  
**City-St-Zip:** DORAL, FL 33178**Title:** TD  
**Name:** SPANGARO, NORBERTO J  
**Address:** 9482 NW 49TH LANE  
**City-St-Zip:** DORAL, FL 33178**Title:** D  
**Name:** RUIZ, ALBERTO  
**Address:** 4626 111TH COURT  
**City-St-Zip:** DORAL, FL 33178

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: CHRISTIAN MAZZOLA

SD

09/27/2012

Electronic Signature of Signing Officer or Director

Date