## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N24399

FILED Apr 22, 2009 Secretary of State

Entity Name: DORAL COURT CONDOMINIUM ASSOCIATION, INC.

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

 8023 LAKE DRIVE
 8037 LAKE DRIVE

 MIAMI, FL 33166
 US

 DORAL, FL 33166
 US

Current Mailing Address: New Mailing Address:

PO BOX 440282 8037 LAKE DRIVE #102 MIAMI, FL 33144 US DORAL, FL 33166 US

FEI Number: 65-0100248 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:

BECKER & POLIAKOFF, P.A. C/O ROSA M. DE LA CAMARA, ESQ. 121 ALHAMBRA PLAZA, 10TH FLOOR 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

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition
Name: BAILEY, EDWIN M Name: PENAFIEL, RAUL
Address: 2010 LAKE DBIVE #101

Address: 8019 LAKE DRIVE #101 Address: 8037 LAKE DRIVE, # 103
City-St-Zip: DORAL, FL 33166 City-St-Zip: DORAL, FL 33166

Title: T ( ) Delete Title: S (X) Change ( ) Addition
Name: FERNANDEZ, ARTURO Name: CARRILLO, VERONIKA
Address: 8015 LAKE DR #201 Address: 8037 LAKE DRIVE #102

 Address:
 8015 LAKE DR #201
 Address:
 8037 LAKE DRIVE #102

 City-St-Zip:
 DORAL, FL 33166
 City-St-Zip:
 DORAL, FL 33166

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

 Name:
 Name:
 DIAZ, ALBERTO

 Address:
 Address:
 8015 LAKE DRIVE #101

 City-St-Zip:
 City-St-Zip:
 DORAL, FL 33166

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

 Name:
 Name:
 MURRUGARRA, ADA

 Address:
 Address:
 8033 LAKE DRIVE #101

 City-St-Zip:
 City-St-Zip:
 DORAL, FL 33166

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: VERONIKA CARRILLO S 04/22/2009