

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25213

FILED
Apr 28, 2007
Secretary of State

Entity Name: VILLAGE OF DORAL PINES ASSOCIATION, INC.

Current Principal Place of Business:

13200 SW 128 ST.
SUITE 82
MIAMI, FL 33186 US

Current Mailing Address:

14275 SW 142 AVE
MIAMI, FL 33186 US

New Principal Place of Business:

C/O ALLIED PROPERTY GROUP, INC.
12350 SW 132 CT. # 114
MIAMI, FL 33186 US

New Mailing Address:

C/O: ALLIED PROPERTY GROUP, INC.
12350 SW 132 CT. # 114
MIAMI, FL 33186 US

FEI Number: 65-0125925

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TROAY, CARLOS A ESQ
10570 NW 27 STREET
#103
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

TRIAY, CARLOS A ESQ
10570 NW 27 STREET
#103
MIAMI, 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: CARLOS TRIAY

04/28/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CASTILLO, OTTO
Address: 5755 NW 99 PL
City-St-Zip: MIAMI, FL 33178

Title: VP () Delete
Name: MORALES, JOSE
Address: 6584 NW 101 CT.
City-St-Zip: MIAMI, FL 33178

Title: T () Delete
Name: RIVERA, ANES
Address: 5158 NW 98 AVE.
City-St-Zip: MIAMI, FL 33178

Title: S () Delete
Name: MALONE, CHRISTIANE
Address: 5716 NW 101 CT.
City-St-Zip: MIAMI, FL 33178

Title: D () Delete
Name: PUCHE, VILMA
Address: 5763 NW 99 PL
City-St-Zip: MIAMI, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: MALONE, CHRISTIANE
Address: 6584 NW 101 CT.
City-St-Zip: MIAMI, FL 33178

Title: VP (X) Change () Addition
Name: RIVERA, ANA
Address: 5158 NW 98 AVE.
City-St-Zip: MIAMI, FL 33178

Title: D (X) Change () Addition
Name: BHOOMINATHAN, GANESH
Address: 10065 NW 54 TERR.
City-St-Zip: MIAMI, FL 33178

Title: T (X) Change () Addition
Name: KAIRUZ, MARTHA
Address: 5500 NW 101 CT.
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: OTTO CASTILLO

PD

04/28/2007

Electronic Signature of Signing Officer or Director

Date