

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45139

FILED
Apr 15, 2009
Secretary of State

Entity Name: VILLAGE OF DORAL COVE ASSOCIATION, INC.

Current Principal Place of Business:

12350 SW 132 CT.
114
MIAMI, FL 33186 US

New Principal Place of Business:

Current Mailing Address:

12350 SW 132 CT.
114
MIAMI, FL 33186 US

New Mailing Address:

FEI Number: 65-0324673 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRESAUD, NP, CARLOS
10570 NW 27 S TER., #103
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

PRESAUD, NP, CARLOS
10631 N. KENDALL DRIVE
205
MIAMI, FL 33176 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:

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: VERA, DORA
Address: 10257 NW 51ST TERR
City-St-Zip: MIAMI, FL 33178

Title: P () Delete
Name: GONZALEZ, GUILLERMO
Address: 10245 NW 51 LANE
City-St-Zip: MIAMI, FL 33178

Title: P () Delete
Name: SGANGA, RAQUEL
Address: 10239 NW 51 LANE
City-St-Zip: MIAMI, FL 33178

Title: S () Delete
Name: HOREA, MABELLE
Address: 10243 NW 51 LANE
City-St-Zip: MIAMI, FL 33178

Title: D () Delete
Name: ALVARADO, IRENE
Address: 10235 NW S1 LANE
City-St-Zip: DORAL, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: SGANGA, RAQUEL
Address: 10239 NW 51 LANE
City-St-Zip: MIAMI, FL 33178

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

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

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: GUILLERMO GONZALEZ

P

04/15/2009

Electronic Signature of Signing Officer or Director

Date