

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45140

FILED
Apr 27, 2007
Secretary of State

Entity Name: VILLAGE OF DORAL GLEN ASSOCIATION, INC.

Current Principal Place of Business:

C/O MANAGEMENT, INC
14275 SW 142 AVENUE
MIAMI, FL 33186 US

New Principal Place of Business:

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

Current Mailing Address:

C/O MANAGEMENT, INC
14275 SW 142 AVENUE
MIAMI, FL 33186 US

New Mailing Address:

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

FEI Number: 65-0324675

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIAY, CARLOS A.
10570 NW 27 STREET
MIAMI, FL 33172 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: D () Delete
Name: RIVAS, JOSE FELIX
Address: 5171 N.W. 106 AVE.
City-St-Zip: MIAMI, FL 33178

Title: VPD () Delete
Name: GONZALEZ, ROGER
Address: 10530 NW 51 STREET
City-St-Zip: MIAMI, FL 33178

Title: PD () Delete
Name: STEWART, JOHN
Address: 5172 N.W. 106 AVE.
City-St-Zip: MIAMI, FL 33178

Title: D () Delete
Name: WALDO, ORTEGA
Address: 10542 NW 51 STREET
City-St-Zip: MIAMI, FL 33178

Title: D () Delete
Name: VAN BALEN, JORGE
Address: 5165 NW 105 COURT
City-St-Zip: MIAMI, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GONZALEZ, ROGER
Address: 10530 NW 51 ST.
City-St-Zip: MIAMI, FL 33178

Title: TD (X) Change () Addition
Name: TRYBULSKI, EDUMND
Address: 10578 NW 51 LN.
City-St-Zip: MIAMI, FL 33178

Title: VP (X) Change () Addition
Name: ORTEGA, WALDO
Address: 10542 NW 51 ST.
City-St-Zip: MIAMI, FL 33178

Title: S (X) Change () Addition
Name: BOU, DAVID
Address: 10538 NW 51 ST.
City-St-Zip: MIAMI, FL 33178

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: ROGER GONZALEZ

PD

04/27/2007

Electronic Signature of Signing Officer or Director

Date