

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50251

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: VILLAGE OF DORAL GREENS ASSOCIATION, INC.

## Current Principal Place of Business:

ALLIED PROPERTY GROUP INC  
12350 SW 132 CT  
MIAMI, FL 33186 US

## New Principal Place of Business:

## Current Mailing Address:

ALLIED PROPERTY GROUP INC  
12350 SW 132 CT  
MIAMI, FL 33186 US

## New Mailing Address:

FEI Number: 65-0527139      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KUPERMAN, MARC ESQ.  
7695 S.W. 104 ST., STE. 210  
MIAMI, FL 33156 US

## Name and Address of New Registered Agent:

SIMON, LORETTA ESQ.  
12350 SW 132 CT.  
SUITE 114  
MIAMI, FL 33186 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: LORETTA SIMON

04/15/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: CHRIST, PIERRE  
Address: 10254 NW 52 LANE  
City-St-Zip: MIAMI, FL 33178

Title: P ( ) Delete  
Name: ABRANTE, NICOLE M  
Address: 10221 NW 52 LANE  
City-St-Zip: MIAMI, FL 33178

Title: T ( ) Delete  
Name: BRUGAL, RICARDO  
Address: 10261 NW 52 LANE  
City-St-Zip: MIAMI, FL 33178

Title: S ( ) Delete  
Name: AGUILA, ENRIQUE  
Address: 5240 NW 103 AVE  
City-St-Zip: DORAL, FL 33178

Title: D ( ) Delete  
Name: PORCELLI, MARIO  
Address: 10260 NW 52 LANE  
City-St-Zip: DORAL, FL 33178

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: CHRIST, PIERRE  
Address: 10254 NW 52 LANE  
City-St-Zip: DORAL, FL 33178

Title: P (X) Change ( ) Addition  
Name: ABRANTE, NICOLE M  
Address: 10221 NW 52 LANE  
City-St-Zip: DORAL, FL 33178

Title: T (X) Change ( ) Addition  
Name: BRUGAL, RICARDO  
Address: 10261 NW 52 LANE  
City-St-Zip: DORAL, 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: NICOLE ABRANTE

P

04/15/2009

Electronic Signature of Signing Officer or Director

Date