

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004092

FILED
May 30, 2007
Secretary of State

Entity Name: HAWKSNEST AT DORAL HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

15190 SW 136 ST
#18
MIAMI, FL 33196

New Principal Place of Business:

8600 NW 17 STREET
SUITE 145
DORAL, FL 33126

Current Mailing Address:

15190 SW 136 ST
#18
MIAMI, FL 33196

New Mailing Address:

8600 NW 17 STREET
SUITE 145
DORAL, FL 33126

FEI Number: 65-0772841 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

EISINGER, DENNIS P
4000 HOLLYWOOD BLVD.
SUITE 265 - SOUTH
HOLLYWOOD, FL 33021 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: PD () Delete
Name: QUIROZ, FIAVIO
Address: 9105 NW 25 ST #1095
City-St-Zip: MIAMI, FL 33172

Title: DST () Delete
Name: BAPTISTE, DEBORAH
Address: 11305 N W 42 TER
City-St-Zip: DORAL, FL 33178

Title: VPD () Delete
Name: OCANTO, C EVELYNOD
Address: 11352 NW 42 TERR
City-St-Zip: DORAL, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DST (X) Change () Addition
Name: ESCARDO, ALEX
Address: 4211 NW 112 AVENUE
City-St-Zip: DORAL, FL 33178

Title: VPD (X) Change () Addition
Name: OCANTO, LYNDIA
Address: 11352 NW 42 TERR
City-St-Zip: DORAL, 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: FLAVIO QUIROZ

P/D

05/30/2007

Electronic Signature of Signing Officer or Director

Date