

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 91044 017 ****61.25

DOCUMENT # N98000005600 1. Entity Name DORAL MEADOWS HOMEOWNERS' ASSOCIATION, INC.					
Principal Place of Business 14275 SW 142 AVENUE MIAMI, FL 33186			Mailing Address 14275 SW 142 AVENUE MIAMI, FL 33186		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 65-0897327	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent MARS, GARY ESQ. 150 WEST FLAGLER STREET SUITE 2701 MIAMI, FL 33130				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State		10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SELLAN, SANTIAGO 10911 NW 46TH LANE MIAMI, FL 33178 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD GARCIA, ALEX 4504 NW 109 PASS MIAMI, FL 33178 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KAWALEK, SUSAN 4449 NW 109 CT. MIAMI, FL 33178 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PUNYED, JUAN I. 10910 NW 44 TERRACE MIAMI, FL 33178 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT SCHIFFER, SUSANNE 10981 NW 44TH TERR MIAMI, FL 33178 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT FERRERA JR., ANDREW S. 11119 NW 44 TERRACE MIAMI, FL 33178 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RIVAS, DARYS 4618 NW 109TH COURT MIAMI, FL 33178 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUBA, TED 11109 NW 45TH TERR MIAMI, FL 33178 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Manuel S. Soldad</i> MANUEL S. SOLDAD 4/26/04 919-3719 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <i>President</i> Date Daytime Phone #					