2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005600

FILED Jan 23, 2009 Secretary of State

Entity Name: DORAL MEADOWS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

14275 SW 142 AVENUE MIAMI, FL 33186

Current Mailing Address: New Mailing Address:

14275 SW 142 AVENUE MIAMI, FL 33186

FEI Number: 65-0897327 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SKRLD, INC TRIAY, CARLOS 201 ALHAMBRA CIR 2301 NW 87 AVE **SUITE 1102** SUITE 501 CORAL GABLES, FL 33134 US MIAMI, FL 33172 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.

City-St-Zip:

SIGNATURE: CARLOS TRIAY 01/23/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

MIAMI, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete MARVIL, GREGORY MARVIL, GREGORY Name: Name: 4601 NW 109 COURT Address: 14275 SW 142 AVE Address: City-St-Zip: MIAMI, FL 33178 City-St-Zip: MIAMI, FL 33186 Title: Title: (X) Change () Addition () Delete SUAREZ, NELSON Name: SUAREZ, NELSON Name: Address: 4464 NW 109 PASSAGE Address: 14275 SW 142 AVE City-St-Zip: MIAMI, FL 33178 City-St-Zip: MIAMI, FL 33186 Title: () Delete Title: (X) Change () Addition VALDES, JULIO C VALDES, JULIO C Name: Name: 10939 NW 47 LANE 14275 SW 142 AVE Address: Address:

> City-St-Zip: MIAMI, FL 33186 (X) Change () Addition

Title: () Delete Title: Name: MORENO, BRENDA Name: MORENO, BRENDA 4602 NW 109 COURT 14275 SW 142 AVE Address: Address: City-St-Zip: MIAMI, FL 33178 City-St-Zip: MIAMI, FL 33186

Title: () Delete Title: (X) Change () Addition Name:

CONNER, ANDREW MORENO, BRENDA Name: 14275 SW 142 AVE 4450 NW 109 CT Address: Address: City-St-Zip: DORAL, FL 33178 City-St-Zip: MIAMI, FL 33186

() Change (X) Addition Title: () Delete Title:

FONT, ADA Name: Name: Address: Address: 14275 SW 142 AVE MIAMI, FL 33186 City-St-Zip: 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: GREGORY MARVIL Ρ 01/23/2009