2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002571

FILED Mar 16, 2006 Secretary of State

Entity Name: DORAL VILLAGE HOMEOWNER TENANT ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 29250 US HIGHWAU 19 NORTH 481 CLEARWATER, FL 33761 **New Mailing Address: Current Mailing Address:** 29250 US HIGHWAU 19 NORTH CLEARWATER, FL 33761 FEI Number: 59-3572553 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: SCHAFER, SUSAN 29250 US HWY 19 NORTH #481 CLEARWATER, FL 33761 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition CADY, ROD CADY, ROD Name: Name: 29250 US 19N, STE 481 Address: 29250 US HWY N #176 Address: City-St-Zip: CLEARWATER, FL 33761 City-St-Zip: CLEARWATER, FL 33761 Title: Title: (X) Change () Addition () Delete RAHEIM, CHARLOTTE Name: BURKART, PAT Name: Address: 29250 US 19 N #176 Address: 29250 US 19 HWY N #233 City-St-Zip: CLEARWATER, FL 33761 City-St-Zip: CLEARWATER, FL 33761 Title: () Delete Title: (X) Change () Addition BERRY, PRISCILLA BERRY, PRISCILLA Name: Name: 29250 US HIGHWAY 19 NORTH, STE 1 29250 US HWY N #195 Address: Address: City-St-Zip: CLEARWATER, FL 33761 City-St-Zip: CLEARWATER, FL 33761 () Delete (X) Change () Addition Title: Title: CADY, ROD SCHAFER, SUSAN Name: Name: 29250 US HIGHWAU 19 NORTH 29250 US HWYN #481 Address: Address: City-St-Zip: CLEARWATER, FL 33761 City-St-Zip: CLEARWATER, FL 33761 Title: () Delete Title: (X) Change () Addition BURKART, PAT CADY, JILL Name: Name: 29250 US 19N #233 29250 US 19N #176 Address: Address: City-St-Zip: CLEARWATER, FL 33761 City-St-Zip: CLEARWATER, FL 33761 Title: (X) Delete Title: () Change () Addition SCHAFER, SUSAN Name: Name: Address: 29250 US 19 N #451 Address: CLEARWATER, FL 33761 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SUSAN K. SCHAFER S 03/16/2006