

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000002182

Entity Name: CORONADO AT DORAL MASTER ASSOCIATION, INC.**Current Principal Place of Business:**10750 NW 89TH STREET
DORAL, FL 33178**Current Mailing Address:**C/O CASTLE GROUP
12270 SW 3RD STREET 200
PLANTATION, FL 33325 US**FEI Number:** 51-0587279**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HYMAN & MARS, LLP
201 ALHAMBRA CIRCLE, ELEVENTH FLOOR
CORAL GABLES, FL 33134 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:** HYMAN MARS

02/14/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name CABRAL, DIGNA
Address 8900 NW 107TH COURT, #219
City-State-Zip: DORAL FL 33178

Title DIRECTOR
Name RONDON, DAHIANE
Address 10855 NW 89TH TERR #206
City-State-Zip: DORAL FL 33178

Title TREASURER
Name SANTACRUZ, ERWIN
Address 8900 NW 107TH COURT #110
City-State-Zip: DORAL FL 33178

Title VP
Name ORTIZ, ANA
Address 10800 NW 88TH TERRACE, #108
City-State-Zip: DORAL FL 33178

Title DIRECTOR
Name ANTIA, FRANCO
Address 10885 NW 89TH TERRACE #217
City-State-Zip: DORAL FL 33178

Title DIRECTOR
Name HERNANDEZ, FLORENCIA
Address 8933 NW 107TH COURT #101
City-State-Zip: DORAL FL 33178

Title SECRETARY
Name BEDOYA, RENNEE
Address 10805 NW 89TH TERR #108
City-State-Zip: DORAL FL 33178

I hereby 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 all other like empowered.

SIGNATURE: CABRAL, DIGNA

PRESIDENT

02/14/2018

Electronic Signature of Signing Officer/Director Detail

Date