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Apr 10 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 718877 (4)
1. Corporation Name
KENDALLTOWN HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business Mailing Address
10333 SOUTH WEST 76 STREET 10333 SOUTH WEST 76 STREET
MIAMI FL 33173 MIAMI FL 33173-2901

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip
24 Country 29 Country

3. Date Incorporated or Qualified 11/23/1971 3a. Date of Last Report 04/29/1996
4. FEI Number 59-1353211 Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LERNER, LISA, ESQUIRE
C/O SIEGFRIED, KIPHIS, RIVERA, LERNER
201 ALHAMBRA CIRCLE, STE 1102
MIAMI FL 33134

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME ☐ DELETE
D NOVICK, ISREAL
STREET ADDRESS 10333 S.W. 76 STREET
CITY-ST-ZIP MIAMI FL
TITLE NAME ☐ DELETE
D MYERS, SUSAN
STREET ADDRESS 10333 S.W. 76 STREET
CITY-ST-ZIP MIAMI, FL 00000
TITLE NAME ☐ DELETE
DP GRAHAM, MICHAEL
STREET ADDRESS 7614 S.W. 106 AVE.
CITY-ST-ZIP MIAMI FL
TITLE NAME ☐ DELETE
DT SIMORELLI, LOUIS
STREET ADDRESS 10333 S.W. 76 STREET
CITY-ST-ZIP MIAMI FL
TITLE NAME ☐ DELETE
DS MANGANARO, CHARLES
STREET ADDRESS 10333 S.W. 76 STREET
CITY-ST-ZIP MIAMI FL
TITLE NAME ☐ DELETE
D USHAN, GEORGE
STREET ADDRESS 10333 S.W. 76 STREET
CITY-ST-ZIP MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition
1.2 NAME ~~Michael Graham~~
1.3 STREET ADDRESS ~~10333 S.W. 76 St.~~
1.4 CITY-ST-ZIP ~~Miami, FL 33173~~
2.1 TITLE ☐ Change ☒ Addition
2.2 NAME DVP
2.3 STREET ADDRESS DOERR, MARGA
2.4 CITY-ST-ZIP 10333 S.W. 76 St.
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE REQUIRED

4/10/97

CR2E037 (9/96)