

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **734728** (9)

1. Corporation Name

THE TOWERS OF KENDALE LAKES CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**13953 SW 66 STREET
MIAMI FL 33183-6014**

Mailing Address

**13953 SW 66 STREET
MIAMI FL 33183-6014**

3. Date Incorporated or Qualified
12/31/1975

3a. Date of Last Report
03/15/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

59-1777691

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

**BARRERA, PILAR
13951 SW 66 ST # 906
Miami, FL 33183**

81 Name

SAME

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

Pilar Barrera

PILAR BARRERA

1-24-96

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

P

**BARRERA, PILAR
13951 SW 66 ST # 906
Miami, FL 33183**

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

VP

**ROSEN, RUTH V
13953 SW 66TH ST #701
MIAMI FL**

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

SD

**ROSMAN ALEX
13951 SW 66 ST # 810
Miami, FL 33183**

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

**DANEV Robert
13951 SW 66 ST # 901
Miami, FL 33183**

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TD

**RABIN, WALTER
13951 SW 66 ST # 904
Miami, FL 33183**

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

**GRAYSON, AL
13953 SW 66 ST # 807
Miami, FL 33183**

☐ DELETE

13.

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

**D
NASTASI, LEO MD
13951 SW 66 ST # 408
Miami, FL 33183**

☐ Change

☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

**D
CICIC, IVAN
13951 SW 66 ST # 503
Miami, FL 33183**

☐ Change

☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

**D
Goldberg, Sheldon
13953 SW 66 ST # 207
Miami, FL 33183**

☐ Change

☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change

☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change

☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change

☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: **Pilar Barrera**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PILAR BARRERA

1-24-96

(305)

385-6588

Date

Daytime Phone #

CR2E037 (12/95)