## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

1. Corporation Name 735397

## KENDALL HEIGHTS COMMUNITY ASSOCIATION, INC.

Principal Plac	e of Business	Mailing Address	<u>.</u>	<u> </u>				
9380 SUNSET I SUITE 250	DRIVE .	9380 SUNSET DRIVE . SUITE 250						
MIAMI FL 33173 MIAMI FL 33173-3244					3. C	Date Incorporated or Qualified 03/26/1976	3a. Date of Last Report 03/26/1996	
2. Principal F	Place of Business	2a. Mailing Address 26			4. F	El Number <b>59-1669309</b>		Applied For Not Applicable
Suite, Apt	#, elc.	Suite, Apt #, etc.			<b>5.</b> C	ertificate of Status Desired	Y	5 Additional Required
City & Stat	te	City & State			1	lection Campaign Financing rust Fund Contribution		00 May Be ed to Fees
Zip Country 25		Zip 29	Zip Country			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
	9. Name and Address of Current	Registered Agent			10. N	lame and Address of New Re	gistered Agent	•
				Name				
SKI PD	INC		į.	Chrost	Address (D.C	Day Number in that depends		
SKLRD, INC. 201 ALHAMBRA CIRCLE, SUITE 1102			1	82 Street Address (P.O. Box Number is Not Acceptable)				
	GABLES FL 33134		ļī	33				
OOIVAL	CADELO I E 00104		Ĺ,	<u> </u>				
				City			FL  85   Zi	ip Code
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statu	ites, the abo	ove-named	corporation	submits this statement for the p	urpose of changing	a its registered
office or (	registered agent, or both, in the State	of Florida. Such change was	authorized	by the cor	poration's bo	ard of directors. I hereby accep	of the appointment	as registered
-	am familiar with, and accept the obliga	ions of section 617.0503, r	Iorida Statu	les.				
SIGNATURE	Signature, typed or printed name of registered ager	t and title if sonticable (NC	TE : Registered	Agent signature	required when re	instating)	DATE	
12.	OFFICERS AND		13.			DITIONS/CHANGES TO OFFIC		ORS IN 12
TITLE	PD	☐ DELETE	1.1 111	.E	D		☐ Chang	
NAME	FRIEDMAN, LISA		1.2 NA	<b>A</b> €	GRACE	BROWN		
STREET ADDRESS	13700 NW 62ND ST. #150		13 STR	eet address		SW 62 ST 128		
CITY-ST-ZIP	MIAMI FL 33183			r-ST-ZIP	MIAMI			
TITLE	VP	DELETE	2.1 T(T)		D	120 00100	Chang	ge Addition
NAME	GALLAGER, CATHERINE	21	2.2 NA	AF	I -	DO AGUILUZ		A.
STREET ADDRESS	13700 NW 62ND ST. #140		1	EET ADDRESS	į	· · • • • • • • • • • • • • • • •		
CITY-ST-ZIP	MIAMI FL 33183	,		Y-ST-ZIP		SW 62 ST 125		
TITLE	VPD	DELETE	3.1 T(T)		MIAMI	FL 33183	Chano	e Addition
NAME	TAYLOR, ELMIRA		3.2 NAA		1			
STREET ADDRESS				EET ADDRESS	1			
CITY - S1-ZIP	MIAMI FL 33183			Y-ST-ZIP	l			
TITLE	SD SD	DELETE	4.1 TITL			· · · · · · · · · · · · · · · · · · ·	Chang	e Addition
NAME	ISAACS, SHELLY		4, 2 NA	-				
STREET ADDRESS	13700 NW 62ND ST. #248			eet adoress	}			
CITY-ST-ZIP	MIAMI FL 33183			-ST-ZIP				
TITLE	D	DELETE	5.1 TITE				Chang	e Addition
NAME	GORF, ANDY	X	5.2 NAM		ì	•	Viding.	,
STREET ADDRESS	13700 SW 62ND ST #238			EET ADDRESS				
	MIAMI FL 33183				1			
CITY-ST-ZIP TITLE	D MIAMI FL 33183	DELETE	6.1 TITL	r-ST-ZIP F			Chang	e Addition
NAME	-	Decere	6.2 NA		[		town to	,- <u>- , , , , , , , , , , , , , , , , , </u>
	GUILLERMO, VEGA				}	•		
STREET ADDRESS	1 10100 011 00110 01 11 120			EET ADDRESS		4,		
CITY-ST-ZIP	MIAMI FL 33183 by certify that the information supplies	Luith this filing does not aug		Y-ST-ZIP	tated in Real	ion 110 07/3Vi) Elevida Statuta	e   further series +	nat the
informatic	on indicated on this annual report or s	upplemental annual report is	true and a	ccurate and	d that my sign	nature shall have the same lega	al effect as if made	under oath: tha
l am an c	officer or director of the corporation or in Block 12 or Block 13 if changed, or	the receiver or trustee empo	wered to ex	ecute this	report as req	uired by Chapter 617, Florida S	tatutes; and that m	y name

**FILED** 

Mar 31 1997 8:00am

Secretary of State