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Feb 06 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 # 747387 (9)

1. Corporation Name
THE GARDENS OF KENDALL CONDOMINIUM NO. 5 ASSOCIATION, INC.



Principal Place of Business: 10975 S.W. 107 ST MIAMI FL 33176 US
Mailing Address: C/O DIANE BURT 12079 SW 131 AVE. MIAMI FL 33186-6475 US

3. Date Incorporated or Qualified: 05/25/1979
3a. Date of Last Report: 02/12/1996

2. Principal Place of Business: 21
2a. Mailing Address: 26

4. FEI Number: 59-1908957
Applied For: Not Applicable

Suite, Apt. #, etc.: 22
27

5. Certificate of Status Desired:
\$8.75 Additional Fee Required

City & State: 23
28

6. Election Campaign Financing Trust Fund Contribution:
\$5.00 May Be Added to Fees

Zip: 24
Country: 25
29
30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
SKRLD, INC.
201 ALHAMBRA CIRCLE
SUITE 1102
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number Is Not Acceptable)
83
84 City
85 Zip Code: FL

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

Table with 5 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP, and a DELETE checkbox. Rows include officers: JOHN A. SCHMITZ, BILL JAMES, LINDA MYSKIW, ELEANOR SALZMAN, and JACK MORAN.

Table with 5 columns: 1.1 TITLE, 1.2 NAME, 1.3 STREET ADDRESS, 1.4 CITY-ST-ZIP, and Change/Addition checkboxes. Rows 1.1-1.4 are empty.

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: [Handwritten Signature] 1/24/97 305-279-0697

CR2E037 (9/96)