

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753586

FILED
Jan 23, 2009
Secretary of State

Entity Name: KENDALL GLENN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

9000 SW 152ND STREET
102
MIAMI, FL 33157 US

New Principal Place of Business:

Current Mailing Address:

9000 SW 152ND STREET
102
MIAMI, FL 33157 US

New Mailing Address:

FEI Number: 59-2168691 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOTT, FOSTER J
9000 SW 152ND STREET
102
MIAMI, FL 33157 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCHENRY, HAMILTON
Address: 7860 SW 86TH ST #25
City-St-Zip: MIAMI, FL 33143

Title: TD () Delete
Name: KAERCHER, JAMES E
Address: 3203 MARY STREET #1
City-St-Zip: COCONUT GROVE, FL 33133

Title: S () Delete
Name: WOLFE, CHRIS
Address: 7840 SW 86TH ST #21
City-St-Zip: MIAMI, FL 33143

Title: S () Delete
Name: LIMA, MICHAEL
Address: 7840 SW 86 ST. #19
City-St-Zip: MIAMI, FL 33143

Title: D () Delete
Name: ZISMAN, SHEILA
Address: 7880 SW 86TH STREET, 4
City-St-Zip: MIAMI, FL 33143

Title: D (X) Delete
Name: KOMP, JEFFREY
Address: 7880 SW 86TH STREET, 18
City-St-Zip: MIAMI, FL 33143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: KAERCHER, JAMES E
Address: 7890 SW 86 ST #10
City-St-Zip: MIAMI, FL 33143

Title: D (X) Change () Addition
Name: WOLFE, CHRIS
Address: 7840 SW 86TH ST #21
City-St-Zip: MIAMI, FL 33143

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BALLI, CHARLES
Address: 7880 SW 86 ST #3
City-St-Zip: MIAMI, FL 33143

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MCHENRY HAMILTON

PD

01/23/2009

Electronic Signature of Signing Officer or Director

Date