

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 04, 2009
Secretary of State**

DOCUMENT# 768455

Entity Name: KENLAND POINTE CONDOMINIUM I, INC.

Current Principal Place of Business:

C/O MIAMI MANAGEMENT, INC.
14275 SW 142 AVENUE
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

C/O MIAMI MANAGEMENT, INC.
14275 SW 142 AVENUE
MIAMI, FL 33186

New Mailing Address:

FEI Number: 59-2379511 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HYMAN & KAPLAN
150 WEST FLAGLER STREET
MIAMI, FL 33130 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: T () Delete
Name: ABILLEIRA, OLGA
Address: 9022 SW 123 CT O-401
City-St-Zip: MIAMI, FL 33186

Title: SD () Delete
Name: TORRES, SILVIA
Address: 9022 SW 123 COURT #O-108
City-St-Zip: MIAMI, FL 33186

Title: P () Delete
Name: CAMPA, JOSE
Address: 9015 SW 125 AVENUE, #N-302
City-St-Zip: MIAMI, FL 33186

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: ABILLEIRA, OLGA
Address: 14275 SW 142 AVE.
City-St-Zip: MIAMI, FL 33186

Title: SD (X) Change () Addition
Name: TORRES, SILVIA
Address: 14275 SW 142 AVE.
City-St-Zip: MIAMI, FL 33186

Title: P (X) Change () Addition
Name: CAMPA, JOSE
Address: 14275 SW 142 AVE.
City-St-Zip: MIAMI, FL 33186

Title: D () Change (X) Addition
Name: MARTINEZ, EDDIE
Address: 14275 SW 142 AVE.
City-St-Zip: MIAMI, FL 33186

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: JANINE OLIVIERA

MNG

02/04/2009

Electronic Signature of Signing Officer or Director

_____ Date