1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## **DOCUMENT # 771171**

1. Corporation Name

THE HIGHLANDS AT KENDALE LAKES CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

2. Principal Place of Business

21

Mailing Address

2a. Mailing Address

26

5050 N.W. 74TH AVENUE MIAMI FL 33166 THE TIMBERLAKE GROUP, INC. 5050 N.W. 74TH AVENUE MIAMI 33166

## FILED Mar 01, 1999 8:00 am § Secretary of State

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		<b>5</b> 881    881    881	

3. Date incorporated or Qualifed

11/09/1983

Suite, Apt. #,	#, etc. Suite, Apt. #, etc.			4. FEI Number	Applied For			
22	27				59-2481398	Not Applicable		
City & State					5. Certificate of Status Desired	8.75 Additional		
23	28				5. Certificate of Status Desired	Fee Required		
Zip	Country	Zip Country			6. Election Campaign Financing	\$5.00 May Be		
24	25	29 30			Trust Fund Contribution	Added to Fees		
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
PARISER, BRIAN W ESQ.			81	Name	;	ì		
			82	Ctroot Add	and Addrson (D.C. Roy Number in Not Acceptable)			
			82 Street Address (P.O. Box Number is Not Acceptable)					
9130 SOUTH DADELAND BLVD.			83	83				
SUITE 1511					· · · · · · · · · · · · · · · · · · ·			
MIAMI FL 33156			84	City	. FL (	35 Zip Code		
11 Durant to the provisions of Sections 617 0502 and 617 1508. Elevida Statutes the above pared corporation submits this statement for the purpose of changing its registered								
office or registered agent, or both, in the State of Florida Succions of 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.								
agent. I am i	familiar with and accept the obligation	is of Section 617.0503, Florida	Statutes	P.	1/10	100		
SIGNATURE	gnetur typed printed name of registered agent an	Journey Dria		Cari 2	red when reinstating) DATE	///		
12.	gnature, typed or printed name of registered agent an OFFICERS AND I		13.	it signature requir	ADDITIONS/CHANGES TO OFFICERS AND I	DIRECTORS IN 12		
	<u> </u>	DELETE	1.1 TITLE		P i 🔯	Change Addition		
17			1.2 NAME		Mestre, Antonio R.	·		
	LITOLIST, COATE		1.3 STREET		7515 S.W. 153rd. Court,	#106		
ندا	7440 SW 153RD COURT #203				Miami, Florida 33193.	# 100,		
	MIAMI-PL 33193-	☐ DELETE	1.4 CITY-S' 2.1 TITLE	1-211		Change		
, -	SD	Operer	2.2 NAME					
I -	DUINTANA, PAVEL LUIS							
1.2	7435 S.W. 153 COURT, #201		2.3 STREET	j	· i			
	MIAMI FL 33193	☐ DELETE	2.4 CITY-8		TD	Change Addition		
1.	T <del>D</del>		3.1 TITLE		Lora, Kelly,	] onengo		
1	BANTANA, JUAN C		3.2 NAME		7550 S.W. 153rd. Court,	#101		
I *	7420 S.W. 153RD_COURT_#108		3.3 STREE			#101,		
CITY-ST-ZIP	MIAMLFL 33193		3.4. CITY- S	T-ZIP	Miami, Florida 33193.	Change Addition		
TITLE E		☐ DELETE	4.1 TITLE		j .			
	WESTRE, ANTONIO R -	;	4.2 NAME		·	Ì		
STREET ADDRESS 7	7515-S.W153RD COURT #106		4.3 STREE	ADDRESS	,			
CITY-ST-ZIP	<u> </u>		4.4 CITY-S	T-ZIP		Observe DAddings		
TITLE C	D	DELETE 5			L	Change Addition		
NAME C	COKER, ROGER		5.2 NAME			,		
STREET ADDRESS 7	7420 SW 153RD COURT #203		5.3 STREE					
CITY-ST-ZIP	MIAMI FL 33193		5.4 CITY-S	T-ZIP	<u> </u>	TONOR MARKET		
TITLE -E	<b>0</b> -	☐ DELETE	6.1 TITLE		<u>-</u>	Change X Addition		
NAME -	SMITH, FANCY		6.2 NAME		Graham, Malcom,	. #10/		
STREET ADDRESS -7	7615 SW -153RD COURT, #204-		6.3 STREE		7555 S.W. 153rd. Place,	#104,		
CITY-ST-ZIP	MIAMI-FL-33193-		6.4 CITY-S	T-ZIP	Miami, Florida 33193.	that the information		

I 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/97 305 593-1141

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