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

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

POCUMENT # N02268

(3)

3) ' \* ~

## THE GARDENS AT KENDALE LAKES CONDOMINIUM ASSOCIATION, INC

''''' '								( <b>11</b> 1) <b>(111</b> ) <b>(11</b> 1)	A ELDIT ELET LES	
Principal Place of Business Mailing Address							{	ABIT DIEN DAD	II #IBIF BIBH (BB)	
9390 SUNSET D	DRIVE	9380 SUNSET	9380 SUNSET DRIVE				3. Date Incorporated or Qualified			
SUITE B-250		SUITE B-250					·			
MIAMI FL 33173			MIAMI FL 33173			- 1	03/28/1984 4. FEI Number		Tanasa de car	
US		US				l		$\vdash$	Applied For Not Applicable	
2. Principal P	lace of Business	2a. Mailing	Address				59-2431258		<del></del>	
21		<u> </u>	26				5. Certificate of Status Desired		5 Additional	
Suite, Apt	#, elc.		Suite, Apt. #, etc.				8 Flootion Community Figure 1		Required	
22		<u> </u>	27				6. Election Campaign Financing Trust Fund Contribution		May Be	
City & State	e	·····	City & State				7. Is this nonprofit corporation a horneowners association?			
23		28	28				Yes No			
Zip	Country	Zip				8. This corporation owes or has paid the current year Intangible				
24	25	29	30	30			Personal Property Tax due June 30.	X Yes	□ No	
	<ul> <li>9. Name and Address of Cu</li> </ul>	urrent Registered Ago	pistered Agent			10. Name and Address of New Registered Agent				
	•			81	Name					
MOTYCZKA, WILLIAM J.			8		Stroot	it Address (P.O. Box Number is Not Acceptable)				
	W 128 ST					Addies	ss (r.o. box Number is Not Acceptable)			
· PARK PL	ACE OF KENDALL					••			· · · · · · · · · · · · · · · · · · ·	
MIAMI FL	. 33186			84	O:t-			<del>- 11 -</del>		
				84	City		Fi	85 Z	Zip Code	
11. Pursuant	to the provisions of Sections 617	2.0502 and 617.1508, F	Florida Statutes, I	the above	e-named	corpor	ration submits this statement for the purpose	of changin	g its registered	
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 Signature, lyped or predict name of registered agreal and title if applicable. (NOTE Registered Agent signature required when reinstating)  OFFICIONS AND DURY CTORS										
12.	Signature, typed or printed name of registers	od ageol and title if applicable. S AND DIRECTORS	(NOTE Ro	gistered Age	nt signature	e required		in Nincol	(ODO 01.46	
TITLE	SD		DELETE	11 THILE		Υ	ADDITIONS/CHANGES TO OFFICERS AN			
NAME	PINEDA, GLORIA	_	J Dittile	1 2 NAME	•	Vic	ce President/Director	Chang	le 🗀 vonition	
STREET ADDRESS	8050 SW 152ND AVE, #46	07				PIN	NEDA, GLORIA			
CITY-ST-ZIP	MIAMI FL	J!		1 3 STREET		805	50 SW_152ND AVE, #40	7		
TITLE	PD	<del>-</del>	DELETE	14 CITY-S 21 TITLE	T-ZIP	LML	AMI. FL	Chang	ge Addition	
NAME	MOORE, PAMELA J.	L.,	J Dittil	22 NAME	•		easurer / Director	EXT CHAIR	ye L Addition	
STREET ADORESS	8050 SW 152 COURT #41	40				MOC	DRE, PAMELA J.	_		
CITY-ST-ZIP	MIAMI FL	12	ļ	2 3 STREET		805	50 SW 152 COURT, #41	2		
TITLE	D	<u></u>	DELETE	2 4 CITY-S 3 1 TITLE	it - ZIP	7	AMI, FL	Chang	ne 🔀 Addition	
NAME	GORDON, GEORGE	₩0	, Decem	32 NAME			cretary		ויטוויטטא נבט אי	
STREET ADDRESS	8000 SW 152ND CT				*DDDF60		LIPE, MARIA			
CITY-ST-ZIP	MIAMI FL			3.3 STREET			50 SW 152 AVE, #404			
THLE	TD		DELETE	3.4. CITY-S 4.1 TITLE	51 - ZIP	1	MI, FL	☐ Chang	ne bc Addition	
NAME	ATIENZA, OLGA	Į.	G OLLEN				rector		te FET WOOKINU	
STREET ADDRESS		100		4. 2 NAME		POR	RTER, GARY			
	8060 SW 152 AVENUE #4	1UO		4.3 STREET			0 SW 152 AVE, #310			
CITY-ST-ZIP TITLE	MIAMI F D		DELETE	4.4 CITY-SI	1-7IP	MIA	MI, FL	ke Ober	no la delisio	
NAME	<del>-</del> .		JULLEIL	5.1 TITLE	*	Pre	esident / Director	Chang	ge 🔲 Addition	
	LATORRE, ARSENIO	40		5.2 NAME		LAT	ORRE, ARSENIO	_		
STREET ADDRESS	8000 SW 152ND AVE, #11	13		5.3 STREET		1	00 SW 152ND AVE, #11	3		
CITY-S1-ZIP TITLE	MIAMI FL	·····	DELETE	5.4 CITY-ST	T-ZIP	MIA	MI, FL	T AL-	n and	
1		L.		6.1 TITLE		1		Chang	ge 🗀 Addition	
NAME				6.2 NAME						
STREET ADDRESS				63 STREET	ADDRESS					

CITY-SI-ZIP

14. 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 or an attactment with an eddrops.

SIGNATURE: x

Mul ( Haral

R2E037 (10/97)

**FILED** 

Feb 16 1998 8:00am

Secretary of State

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