

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N02268

1. Entity Name

THE GARDENS AT KENDALE LAKES CONDOMINIUM ASSOCIA

Principal Place of Business

13250 SW 135 AVE
MIAMI FL 33186

Mailing Address

13250 SW 135 AVE
MIAMI FL 33186-6489

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2431258

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MOTYCZKA, WILLIAM J.
13410 SW 128 ST
PARK PLACE OF KENDALL
MIAMI FL 33186

7. Name and Address of New Registered Agent

Name

SKRLD, INC.

Street Address (P.O. Box Number is Not Acceptable)

201 ALHAMBRA CIRCLE, SUITE 1102

City


CORAL GABLES

FL

Zip Code
33134

8. 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 SKRLD, INC. BY LISA LERNER



, SECRETARY

1-24-00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE VPD ☐ Delete
NAME PINEDA, GLORIA
STREET ADDRESS 8050 SW 152ND AVE, #407
CITY-ST-ZIP MIAMI FL

TITLE TD ☐ Delete
NAME MOORE, PAMELA J.
STREET ADDRESS 8050 SW 152 COURT #412
CITY-ST-ZIP MIAMI FL

TITLE S ☐ Delete
NAME FELIPE, MARIA
STREET ADDRESS 8050 SW 152ND AVE., #404
CITY-ST-ZIP MIAMI FL

TITLE PD ☒ Delete
NAME LATORRE, ARSENIO
STREET ADDRESS 8000 SW 152ND AVE, #113
CITY-ST-ZIP MIAMI FL

TITLE D ☐ Delete
NAME ATIENZA, OLGA
STREET ADDRESS 13301 SW 88 TERRACE #E
CITY-ST-ZIP MIAMI FL 33186

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PD ☒ Change ☐ Addition
NAME Moore, Pamela J.
STREET ADDRESS 8050 SW 152 Court #412
CITY-ST-ZIP Miami, FL. 33193

TITLE STD ☒ Change ☐ Addition
NAME Felipe, Maria
STREET ADDRESS 8050 SW 152 Ave. #404
CITY-ST-ZIP Miami, FL. 33193

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/21/2000



DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)