

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02268

FILED
Mar 20, 2009
Secretary of State

Entity Name: THE GARDENS AT KENDALE LAKES CONDOMINIUM ASSOCIATION, INC

Current Principal Place of Business:

8020 SW 152 AVENUE
UNIT 312
MIAMI, FL 33193

New Principal Place of Business:

4871 SW 75TH AVENUE
MIAMI, FL 33155

Current Mailing Address:

P.O. BOX 83-1328
MIAMI, FL 33283

New Mailing Address:

4871 SW 75TH AVENUE
MIAMI, FL 33155

FEI Number: 59-2431258

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKRLD, INC.
201 ALHAMBRA CIRCLE STE 1102
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

PRIORITY MANANGEMENT GROUP
4871 SW 75 AVENUE
MIAMI, FL 33155 US

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: PRIORITY MANAGEMENT GROUP

03/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MESA, MERCEDES
Address: 8020 SW 152 AVE #312
City-St-Zip: MIAMI, FL 33193

Title: VPD () Delete
Name: MOTOLA, ISMERY S
Address: 8000 SW 152 AVE #108
City-St-Zip: MIAMI, FL 33193

Title: TD () Delete
Name: TEJERA, ITSVAN
Address: 8000 SW 152 AVE #107
City-St-Zip: MIAMI, FL 33193

Title: SD () Delete
Name: ALVAREZ, ADDA
Address: 8050 SW 152 AVE., SUITE 402
City-St-Zip: MIAMI, FL 33193

Title: D () Delete
Name: MONTOTO, CARIDAD
Address: 8060 SW 152 AVE #512
City-St-Zip: MIAMI, FL 33193

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: PORTA, KATIA
Address: 8010 SW 152 AVE, # 214
City-St-Zip: MIAMI, FL 33

Title: SD (X) Change () Addition
Name: ALVAREZ, ADDA
Address: 8050 SW 152 AVE., #402
City-St-Zip: MIAMI, FL 33193

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: ELIANA ALVAREZ

AGEN

03/20/2009

Electronic Signature of Signing Officer or Director

Date