2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N12681

KENDALL FORESTS OWNERS' ASSOCIATION, INC.

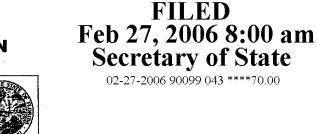


Principal Place of Business **COURTESY PROPERTY MANAGEMENT** 13250 SOUTHWEST 135TH AVENUE MIAMI, FL 33186 US

Mailing Address

COURTESY PROPERTY MANAGEMENT 13250 SOUTHWEST 135TH AVENUE

MIAMI, FL 33186 US



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9 Deleginal Place of Business 2 Mailine Address						_				
2. Principal Place of Business 3.		J. Widm	. Mailing Address				A IJAJA BIIGI IQIRI HSE BIOLI	l Billil Libit i	Libit Bibli bia	
Suite, Apt. #, etc. S		Suit	Suite, Apt. #, etc.			02082006 C	Chg-NP C	R2E037	(11/05)	
City & State Cit		ly & State			4. FEI Number Applied For 59-2693032 Not Applicable					
Zip Country Zip			Country		5. Certificate of S	Status Desired		8.75 Add	itional	
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent				
				Name						
SKRLD, INC. 201 ALHAMBRA CIRCLE, STE. 1102 MIAMI, FL. 33134			Street Addres		Address (ess (P.O. Box Number is Not Acceptable)				
Trinciple CO COT										
			City					FL	Zip Cod	е
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. I am familiar with, and acc										and accept
the obligations of registered agent.										
SIGNATURE										
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
Filing Fee is \$61.25 Due by May 1, 2006			9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be	Make	check	pavable t	
						\$5.00 May Be Added to Fees Make check payable to Florida Department of State				
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR					CTORS IN	10
TITLE	PD	120.0	Delete	TITLE					Change	Addition
NAME	ANDRES, VARELA		(prof protoco	NAME	RAM	11REZ,CATI	ALIND St. #51	'/a		ا
STREET ADDRESS	11820 SW 80ST, UNIT 314			STREET ADDRESS	1184	0 5W 80	3/1	φ-		
CITY-ST-ZIP	MIAMI, FL 33183			CITY-ST-ZIP	MIA	mi FL	33183			
TITLE	D		⊠ Delete	TITLE		NA, MARI		[Change	∠ Addition
NAME	VIRGILIO, CINTRA		•	NAME	1100	NH / MARI	st. # 31,	/		
STREET ADDRESS	11800 SW 80 STREET, UNIT 120	0		STREET ADDRESS	1100	i su ou				
CITY-ST-ZIP	MIAMI, FL 33189			CITY-ST-ZIP	MIA	AMI FL	33103			
TITLE	VPD		Delete	TITLE				[Change	☐ Addition
NAME	SOCORRO, CORTES			NAME						
STREET ADDRESS	11800 SW 80 ST. UNIT 114			STREET ADDRESS	;					
CITY-\$T-ZIP	MIAMI, FL 33183			CITY-ST-ZIP						
TITLE	SD CASTELLANOS, ANA		☐ Delete	TITLE		•		ì	Change	☐ Addition
name Street address	11840 SW 80 ST. UNIT 511			NAME STREET ADDRESS	,					
CITY-ST-ZIP	MIAMI, FL 33183			CITY-ST-ZIP	'					
TITLE	1417 UVII, 1 2 00 700		☐ Delete	TITLE	+		•		Change	☐ Addition
NAME	İ		LI Delete	NAME				ı	Ulanye	MOULIUM
STREET ADDRESS	1			STREET ADDRESS	;					
CITY-ST-ZIP				CITY-ST-ZIP						
TITLE			☐ Delete	TITLE	+			- [Change	☐ Addition
NAME				NAME				-		
STREET ADDRESS				STREET ADDRESS	;					1
CITY-ST_ZIP				_CITY-ST-ZIP		,				المارتين مياسيس

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 02-22-06 SIGNATURE: Daytime Phone #