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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N22855

1. Corporation Name
KENLAND WALK CONDOMINIUM IV, INC.

Principal Place of Business: % J&M CONDO MANAGEMENT & MAINTENANCE, INC. 221 S.W. 22ND AVE. SUITE 219 MIAMI FL 33135
Mailing Address: 275 FONTAINEBLEAU BLVD 200 MIAMI FL 33172 US



2. Principal Place of Business (21-24), 2a. Mailing Address (26-29), 3. Date Incorporated or Qualified (10/06/1987), 4. FEI Number (65-0035689), 5. Certificate of Status Desired, 6. Election Campaign Financing Trust Fund Contribution.

9. Name and Address of Current Registered Agent (BECKER & POLIAKOFF P.A.), 10. Name and Address of New Registered Agent (81-85).

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: _____ DATE: _____ (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS (VTD DAVIS, FRANK; SD LOPEZ, ANGELIA; P COHEN, CRAIG; D JIMENEZ, ALICIA), 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (1.1-6.4).

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 on an attachment with an address, with all other like empowered.

SIGNATURE: _____ SIGNATURE REQUIRED _____ DATE: 1/19/99 DAYTIME PHONE #: 207-9532

CR2E037 (11/98)