FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 10, 1999 8:00 am Secretary of State

02-10-1999 90012 008 \*\*\*\*61.25

DOCUM	IENT	# N	<b>N228</b>	55

1. Corporation Name

KENLAND WALK CONDOMINIUM IV, INC.

Principal Place of Business
% J&M CONDO MANAGEMENT & MAINTENAN
ONE OWE DON'T AVE CHITE 310

Mailing Address 275 FONTAINEBLEAU BLVD

NCE. INC. MIAMI FL 33135

200 MIAMI FL 33172

	Principal Pla	ncipal Place of Business 2a. Mailing Address					<ol> <li>Date Incorporated or Qualifed 10/06/1987</li> </ol>	٠.	•	
21			26				4. FEI Number		Ann	lied For
	Suite, Apt. #	t, etc.	Suite, Apt. #, etc.				65-0035689		<u> </u>	Applicable
22			27				03 0033003			
	City & State City & State					5. Certifcate of Status Desired		\$8.75 Ac		
23			28	<u> </u>						
	Zip	Country	Zip	Coun	шу		6. Election Campaign Financing Trust Fund Contribution		\$5.00 N Added to	
24		25	29	30				Pegistered		
		9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registered Agent					
ı				[	ا'°	Name				
Į	BECKER &	POLIAKOFF P.A.		1	82 Street Address (P.O. Box Number is Not Acceptable)					
i		LAGOON DRIVE, SUITE 250								
l				7	83			• •		
l	MIAMI FL	33120		<u> </u>	_				Teel 3:- 6	
l				į,	84	City		:FI	85 Zip C	oue .
نئا	والمروانية فالمستان		2 - 1 047 4500 Florido Status	too tho oh		nomed con	poration submits this statement for the	numose o	f changing its r	egistered
111 33	office or re agent. I ar	o the provisions of Sections 617,050, egistered agent, or both, in the State in familiar with, and accept the obliga					ion's board of directors. I hereby acce	pt the appo	intmentias reg	stered
s	IGNATURE	Signature, typed or printed name of registered ager	t and title if applicable. (NOTE	E: Registered A	Agent	t signature requir	red when reinstating)	DATE		
1:			D DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS A	ND DIRECTOR	RS IN 12
├	<u></u> ъ	VTD	☐ DELETE	1,1 TITL	LE				Change	☐ Addition
		· • •		1.2 NA	ME					
N.A	ME	DAVIS, FRANK	_				했으러 하면에 그			
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cr	ry-st-zip	MIAMI FL 33186		1.4 CIT		-ZiP		<del></del>	Change	Addition
TE	'LE	SD	☐ DELETE	2.1 TM	LE				Change	
N/	ME	LOPEZ, ANGELIA		2.2 NA	ME					
ST	REET ADDRESS	8827 SW 123 CT APT 210		2.3 STF	REET	ADDRESS				
-	TY-ST-ZIP	MIAMI FL 33186		2, 4 CIT	TY-S	T-ZIP	·			
-	LE	P	☐ OELETE	3.1 TITI	le .			_ • = "	~ - ☐ Change	Addition
1		COHEN, CRAIG		3.2 NA	ME					
l .	WE:					ADDRESS				
1	REET ADDRESS	8827 S.W. 123 CT. APT. #207								•
-	TY-ST-ZIP	MIAMI FL 33186	□ DELETE	3.4. CI		1-ZIP			Change	Addition
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ST	REET ADDRESS	8827 S.W. 123 CT. APT #103		4.3 STI	REET	ADDRESS		3 5 7		
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l N	AME				,	T ADDRESS				
S	TREET ADDRESS	( 1984 ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	***	0.381	KEE	ALUTESS				

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 trusted empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 13 if chapter and on an attackment with an address with all other like amounted. officer or director of the corporation or the Block 12 or Block 13 if chapter or on an