## 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N97000000968

TI FILED
Sep 06, 2007
Secretary of State

Entity Name: KENDALL GATE HOMEOWNER'S ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** C/O COURTESY PROPERTY MANAGEMENT INC 13250 SW 135TH AVE MIAMI, FL 33186 **Current Mailing Address: New Mailing Address:** C/O COURTESY PROPERTY MANAGEMENT INC 13250 SW 135TH AVE MIAMI, FL 33186 FEI Number: 65-0772766 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GLASSFORD, DALE SIEGFRIED, RIVERA 12912 SW 133RD COURT 201 ALAHAMBRE CIRCLE SUITE B SUITE 1102 MIAMI, FL 33186 US MIAMI, FL 33134 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: MARIEL LIZANO 09/06/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SUMOZA, MIGUEL Name: Name: 8684 SW 161 AVE Address: Address: City-St-Zip: MIAMI, FL 33193 City-St-Zip: ( ) Delete Title: Title: () Change () Addition GUERRERO, ALBERTO Name: Name: Address: 15913 SW 86 TERR Address: City-St-Zip: MIAMI, FL 33193 City-St-Zip: Title: () Delete Title: SD ( ) Change (X) Addition AMADOR, ANTONIO Name: Name: 8751 SW 158 PATH Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33193 Title: () Delete Title: ( ) Change (X) Addition Name: Name: DE LEON, NORMA 8718 SW 158 PLACE Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33193 Title: () Delete Title: ( ) Change (X) Addition CASTILLO, GERMAN Name: Name: 8718 SW 161 AVE. Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33193

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: MIGUEL SUMOZA PD 09/06/2007