

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 91786 037 ****61.25

DOCUMENT # 771171

1. Entity Name

THE HIGHLANDS AT KENDALE LAKES CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

5050 N.W. 74TH AVENUE
 MIAMI FL 33166

Mailing Address

Management
 THE TIMBERLAKE GROUP, INC.
 5050 N.W. 74TH AVENUE
 MIAMI 33166

2. Principal Place of Business

6501 NW 30 Street
 Suite, Apt. #, etc.
 Ste 385

3. Mailing Address

6501 NW 30 Street
 Suite, Apt. #, etc.
 9130 S. Dadeland Blvd., # 1511

City & State

Miami, FL 33166

City & State

Miami, FL

Zip

Country

Zip

33156

Country

4. FEI Number

59-2481398

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

PARISER, BRIAN W ESQ.
 9130 SOUTH DADELAND BLVD.
 SUITE 1511
 MIAMI FL 33156

7. Name and Address of New Registered Agent

Name *Law office of Brian Pariser*
 Street Address (P.O. Box Number is Not Acceptable)
Dadeland #
 9130 S. Dadeland Blvd., # 1511
 City *Miami,* **FL** Zip Code *33156*

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.

SIGNATURE

Brian W. Pariser *Brian W. Pariser*

4/30/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
 NAME **P**
 STREET ADDRESS **MESTRE, ANTONIO R**
 CITY-ST-ZIP **7515 SW 153RD CT #106**
MIAMI FL 33193

TITLE ☐ Delete
 NAME **T**
 STREET ADDRESS **KELLY, LORA**
 CITY-ST-ZIP **7550 SW 153RD CT #101**
MIAMI FL 33193

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **SANCHEZ, ORLANDO**
 CITY-ST-ZIP **7430 SW 153RD PLACE #201**
MIAMI FL 33193

TITLE ☒ Delete
 NAME **SD**
 STREET ADDRESS **GRAHAM, MALCOM**
 CITY-ST-ZIP **7555 SW 153RD PLACE #104**
MIAMI FL 33193

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
 NAME **PD**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
 NAME **S/TO**
 STREET ADDRESS *Lora, Kelly*
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. 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 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:

SPINAZZA RECORDED *Antonio R Mestre* *4/18/02*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)