

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00302

FILED  
Jul 05, 2007  
Secretary of State

**Entity Name:** KENDALL LAKES HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

P.O. BOX 1437  
POMPAN BEACH, FL 33061

**New Principal Place of Business:**

1580 NW 3RD AVE  
POMPAN BEACH, FL 33060 US

**Current Mailing Address:**

P.O. BOX 1437  
POMPAN BEACH, FL 33061

**New Mailing Address:**

P.O. BOX 1437  
POMPAN BEACH, FL 33061 US

**FEI Number:** 59-2371989 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

CAMERON, WILLIE J  
1915 N W 5TH WAY  
POMPAN BEACH, FL 33060 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TD ( ) Delete  
Name: CAMERON, WILLIE J  
Address: 1915 N W 5TH WAY  
City-St-Zip: POMPAN BEACH, FL 33060 US

Title: P ( ) Delete  
Name: THOMAS, HAROLD  
Address: 465 NW 18TH COURT  
City-St-Zip: POMPAN BEACH, FL 33060 US

Title: D (X) Delete  
Name: MCRAY, ARNOLD  
Address: 315 NW 19TH COURT  
City-St-Zip: POMPAN BEACH, FL 33060 US

Title: VD ( ) Delete  
Name: DESHIELDS, JOHN  
Address: 324 N.W 16 CT  
City-St-Zip: POMPAN BEACH, FL 33060 US

Title: S ( ) Delete  
Name: PHILLIPS, MARY  
Address: 384 N W 19TH STREET  
City-St-Zip: POMPAN BEACH, FL 33060 US

Title: D ( ) Delete  
Name: JACKSON, CYNTHIA  
Address: 321 NW 16TH COURT  
City-St-Zip: POMPAN BEACH, FL 33060 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: WILLIE J. CAMERON

TD

07/05/2007

Electronic Signature of Signing Officer or Director

Date