2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 771171

FILED Jan 21, 2009 Secretary of State

Entity Name: THE HIGHLANDS AT KENDALE LAKES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 7655 NW 50 STREET MIAMI, FL 33166 **Current Mailing Address: New Mailing Address:** 7566 NW 50 STREET MIAMI, FL 33166 FEI Number: 59-2481398 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: PEREZ-SIAM, ESQ, FRANK 7001 SW 87TH CT MIAMI, FL 331732509 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete PIERRE, RIVIERE Name: Name: 7655 NW 50 STREET Address: Address: City-St-Zip: MIAMI, FL 33166 City-St-Zip: Title: () Delete Title: () Change () Addition Name: SANCHEZ, ORLANDO Name: Address: 7566 NW 50 STREET Address: City-St-Zip: MIAMI, FL 33166 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition FLOREZ, OSCAR Name: Name: 7566 NW 50 STREET Address: Address: City-St-Zip: MIAMI, FL 33166 City-St-Zip: () Delete Title: Title: () Change () Addition MAYO, ELCY Name: Name: Address: 7655 NW 50 STREET Address: City-St-Zip: MIAMI, FL 33166 City-St-Zip: Title: Title: () Delete () Change (X) Addition BELLO, MANUEL Name: Name: 7655 NW 50 STREET Address: Address: MIAMI, FL 33166 City-St-Zip: 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: SANCHEZ ORLANDO MR 01/21/2009