

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 718877

**Entity Name:** KENDALLTOWN HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

10333 SOUTH WEST 76 STREET  
MIAMI, FL 33173

**Current Mailing Address:**

10333 SOUTH WEST 76 STREET  
MIAMI, FL 33173

**FEI Number:** 59-1353211

**Certificate of Status Desired:** Yes

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

SKRLD, INC.  
201 ALHAMBRA CIR  
STE 1102  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MANGUM, DONALD  
Address        10333 SOUTH WEST 76 STREET  
City-State-Zip: MIAMI FL 33173

Title            VP  
Name            HARNED, MICHAEL  
Address        10333 SOUTH WEST 76 STREET  
City-State-Zip: MIAMI FL 33173

Title            SECRETARY  
Name            SCOTT, MARSHA  
Address        10333 SOUTH WEST 76 STREET  
City-State-Zip: MIAMI FL 33173

Title            TREASURER  
Name            PETRAITIS, ENRIQUE  
Address        10333 SOUTH WEST 76 STREET  
City-State-Zip: MIAMI FL 33173

Title            DIRECTOR  
Name            RAMSAROOP, SHOBHA  
Address        10333 SOUTH WEST 76 STREET  
City-State-Zip: MIAMI FL 33173

Title            DIRECTOR  
Name            GRECO, JOHN  
Address        10333 SOUTH WEST 76 STREET  
City-State-Zip: MIAMI FL 33173

Title            DIRECTOR  
Name            MERKER, LAURIE  
Address        10333 SOUTH WEST 76 STREET  
City-State-Zip: MIAMI FL 33173

Title            DIRECTOR  
Name            GARCIGA, JOSE  
Address        10333 SOUTH WEST 76 STREET  
City-State-Zip: MIAMI FL 33173

**Continues on page 2**

*I hereby 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 all other like empowered.*

**SIGNATURE:** DONALD MANGUM

**PRESIDENT**

**03/27/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           SHENKMAN, DAVID  
Address        10333 SOUTH WEST 76 STREET  
City-State-Zip: MIAMI FL 33173