

**2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED 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 SECRETARY  
Name SCOTT, MARSHA  
Address 10333 SOUTH WEST 76 STREET  
City-State-Zip: MIAMI FL 33173

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

Title DIRECTOR  
Name GUERRA, ODETTE  
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 DIRECTOR  
Name ZEEFE, LAUREN  
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 TREASURER  
Name DE MARCHENA, VIVIAN  
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

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*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:** DON MANGUM

**PRESIDENT**

**11/12/2020**

Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date

**Officer/Director Detail Continued :**

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