

**2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 718877

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

**FILED**  
**Jun 14, 2018**  
**Secretary of State**  
**CC5698634502**

**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            SIMMONS, DIONNE  
Address        10333 SOUTH WEST 76 STREET  
City-State-Zip: MIAMI FL 33173

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

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

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

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

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

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

Title            DIRECTOR  
Name            SHEHADEH, MARIA  
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:** DIONNE SIMMONS

**PRESIDENT**

**06/14/2018**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

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