

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724924

FILED
Mar 09, 2017
Secretary of State
CC4207409418

Entity Name: KENDALE LAKES MASTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8399 SOUTHWEST 137TH AVENUE
MIAMI, FL 33183

Current Mailing Address:

9000 SW 152 STREET
102
MIAMI, FL 33157 US

FEI Number: 59-1431399

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GLAZER AND ASSOCIATES, P.A.
3113 STIRLING ROAD
SUITE 201
FORT LAUDERDALE , FL 33312 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: ERIC M. GLAZER

03/09/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name STROUB, MARSHA
Address 8409 SW 137 AVENUE
City-State-Zip: MIAMI FL 33183

Title SECRETARY
Name ALT, MAURICE
Address 8429 SW 137 AVENUE
City-State-Zip: MIAMI FL 33183

Title VICE-PRESIDENT
Name DOUGHTY, LORRAINE
Address 8315 SW 137 AVENUE
City-State-Zip: MIAMI FL 33183

Title PRESIDENT
Name GOMEZ, DORIS
Address 8579 SW 137 AVENUE
City-State-Zip: MIAMI FL 33183

Title DIRECTOR
Name SANCHEZ, GUSTAVO
Address 8339 SW 137 AVENUE
City-State-Zip: MIAMI FL 33183

Title DIRECTOR
Name GALARZA, JUDITH
Address 8317 SW 137 AVENUE
City-State-Zip: MIAMI FL 33183

Title DIRECTOR
Name CASA, NORLAN
Address 8341 SW 137 AVENUE
City-State-Zip: MIAMI FL 33183

Title DIRECTOR
Name GUITIERREZ, ARAMIS
Address 8639 SW 137 AVENUE
City-State-Zip: MIAMI FL 33183

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: DORIS GOMEZ

PRESIDENT

03/09/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MENENDEZ, CLAUDIO
Address 8383 SW 137 AVENUE
City-State-Zip: MIAMI FL 33183

Title DIRECTOR
Name ALFARAS, CARLOS
Address 8553 SW 137 AVENUE
City-State-Zip: MIAMI FL 33183