

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727885

Entity Name: KENNEDY HOUSE CONDOMINIUM, INC.

FILED
Feb 18, 2019
Secretary of State
7559457952CC

Current Principal Place of Business:

C/O ASSOCIATION SERVICES OF FLORIDA
10112 USA TODAY WAY
MIRAMAR, FL 33025

Current Mailing Address:

C/O ASSOCIATION SERVICES OF FLORIDA
10112 USA TODAY WAY
MIRAMAR, FL 33025 US

FEI Number: 59-1806177

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TRIAI, CARLOS A.
2301 NW 87 AVE
SUITE 501
DORAL, FL 33172 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: CARLOS A. TRIAY

02/18/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name CIOFFI, EUGENE
Address C/O ASSOCIATION SERVICES OF FLORIDA
10112 USA TODAY WAY
City-State-Zip: MIRAMAR FL 33025

Title VP
Name SCEMAMA, PHILIPPE
Address C/O ASSOCIATION SERVICES OF FLORIDA
10112 USA TODAY WAY
City-State-Zip: MIRAMAR FL 33025

Title DIRECTOR
Name ESCORCIA, EULALIA
Address C/O ASSOCIATION SERVICES OF FLORIDA
10112 USA TODAY WAY
City-State-Zip: MIRAMAR FL 33025

Title S
Name GOMEZ, LEYLA
Address C/O ASSOCIATION SERVICES OF FLORIDA
10112 USA TODAY WAY
City-State-Zip: MIRAMAR FL 33025

Title TREASURER
Name FLORES BATINEH, KENDRA
Address C/O ASSOCIATION SERVICES OF FLORIDA
10112 USA TODAY WAY
City-State-Zip: MIRAMAR FL 33025

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: EUGENE CIOFFI

PRESIDENT

02/18/2019

Electronic Signature of Signing Officer/Director Detail

Date