

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 734417

**Entity Name:** KINGS CREEK WEST CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Feb 01, 2024**  
**Secretary of State**  
**0748367874CC**

**Current Principal Place of Business:**

7965 SW 86TH STREET  
UNIT 130  
MIAMI, FL 33143

**Current Mailing Address:**

7965 SW 86TH STREET  
UNIT 130  
MIAMI, FL 33143

**FEI Number: 59-1648815**

**Certificate of Status Desired: No**

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

SKRLD, INC.  
201 ALHAMBRA CIRCLE, 11TH FLOOR  
CORAL GABLES, 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            ROSA, CATHLEEN  
Address        8200 NW 33 ST  
                  300  
City-State-Zip: MIAMI FL 33122

Title            TREASURER  
Name            FORMAN, GRIZELLE  
Address        8200 NW 33 ST.  
                  300  
City-State-Zip: MIAMI FL 33122

Title            VP  
Name            NEUMANN, PAUL  
Address        8200 NW 33 ST.  
                  300  
City-State-Zip: MIAMI FL 33122

Title            DIRECTOR  
Name            MCCARTHY, MARGARET  
Address        8200 NW 33 ST.  
                  300  
City-State-Zip: MIAMI FL 33122

Title            SECRETARY  
Name            CRUZ, IVETTE  
Address        8200 NW 33RD  
                  300  
City-State-Zip: MIAMI FL 33122

Title            DIRECTOR  
Name            PARRADO, PEDRO  
Address        7995 SW 86TH ST  
                  302  
City-State-Zip: MIAMI FL 33143

*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: CATHLEEN ROSA**

**PRESIDENT**

**02/01/2024**

Electronic Signature of Signing Officer/Director Detail

Date