

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734728

Entity Name: THE TOWERS OF KENDALE LAKES CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**13953 SW 66 STREET
MIAMI, FL 33183**Current Mailing Address:**MANAGEMENT OFFICE 13953 SW 66 STREET
MIAMI, FL 33183 US**FEI Number: 59-1805056****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LAW OFFICE OF STUART J. NUNEZ, P.A.
7200 CORPORATE CENTER DRIVE STE 510
MIAMI, FL 33126 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: STUART J NUNEZ****01/22/2016**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** PRESIDENT
Name KALOF, GREGORY
Address 13951 SW 66 STREET # B-407
City-State-Zip: MIAMI FL 33183**Title** VP
Name VILLEDROUIN, JEAN
Address 13953 SW 66 ST # B705
City-State-Zip: MIAMI FL 33183**Title** TREASURER
Name RECALDE, AMIRA
Address 13951 SW 66 ST # A 905
City-State-Zip: MIAMI FL 33183**Title** SECRETARY
Name ORIOL , CARMEN
Address 13951 SW 66TH ST. # A708
City-State-Zip: MIAMI FL 33183**Title** DIRECTOR
Name LUGO, MARIA
Address 13951 SW 66TH, STREET
A606
City-State-Zip: MIAMI FL 33183**Title** DIRECTOR
Name BAZO, LIVIA
Address 13951 SW 66TH, STREET
A810
City-State-Zip: MIAMI FL 33183**Title** DIRECTOR
Name MORENO, LUIS
Address 13953 SW 66TH, STREET
B200
City-State-Zip: MIAMI FL 33183**Title** DIRECTOR
Name VILLEDROUIN, JEAN
Address 13953 SW 66 ST
705 B
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: LIVIA BAZO**PRESIDENT****01/22/2016**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

| | | | |
|-----------------|----------------------------|-----------------|------------------------|
| Title | DIRECTOR | Title | DIRECTOR |
| Name | DE LARA , RICARDO | Name | SEGURA, ANA M |
| Address | 13953 SW 66 ST APT 506B | Address | 13951 SW 66 ST 909A |
| City-State-Zip: | MIAMI FL 33183 | City-State-Zip: | MIAMI FL 33183 |