

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735305

FILED
Apr 25, 2014
Secretary of State
CC2506120011

Entity Name: KAWAMA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

15600 SW 288 ST.
#406
HOMESTEAD, FL 33030

Current Mailing Address:

PO BOX 924176
HOMESTEAD, FL 33092

FEI Number: 59-2538019

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DOKOVNA, JAIME PA
121 ALHAMBRA PLAZA
10 FLOOR
CORAL GABLES, FL, 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 PD
Name COHEN, ROBERT T.
Address 15600 SW 288 STREET
406
City-State-Zip: HOMESTEAD FL 33033

Title VPD
Name BROWN, WILLIAM
Address 15600 SW 288 STREET
406
City-State-Zip: HOMESTEAD FL 33033

Title STD
Name SANDER, ROBERT J
Address 15600 SW 288 STREET
406
City-State-Zip: HOMESTEAD FL 33033

Title D
Name PENAR, JOSEPH
Address 15600 SW 288 STREET
406
City-State-Zip: HOMESTEAD FL 33033

Title D
Name GUIASOLA, FERNANDO V
Address 15600 SW 288 STREET
406
City-State-Zip: HOMESTEAD FL 33033

Title D
Name KETTENACKER, HERB
Address 15600 SW 288 STREET
406
City-State-Zip: HOMESTEAD FL 33033

Title D
Name CARCASSES, ANTHONY
Address 15600 SW 288 STREET
406
City-State-Zip: HOMESTEAD FL 33033

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: ROBERT T COHEN

PRESIDENT

04/25/2014

Electronic Signature of Signing Officer/Director Detail

Date