

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735397

FILED
Feb 23, 2018
Secretary of State
CC7758704808

Entity Name: KENDALL HEIGHTS COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

13700 SW 62 SREET
MIAMI, FL 33183

Current Mailing Address:

C/O ALLIED PROPERTY GROUP, INC.
12350 SW 132ND COURT SUITE 114
MIAMI, FL 33186 US

FEI Number: 59-1669309

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CUEVAS AND ASSOCIATES, P.A.
7480 SW 40 STREET SUITE 600
MIAMI, FL 33155 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 GARCIA, LUZ
Address C/O ALLIED PROPERTY GROUP, INC.
 12350 SW 132ND COURT SUITE 114
City-State-Zip: MIAMI FL 33186

Title TREASURER
Name BROWN, GRACE
Address C/O ALLIED PROPERTY GROUP, INC.
 12350 SW 132ND COURT SUITE 114
City-State-Zip: MIAMI FL 33186

Title DIRECTOR
Name SALDANAS , NEMROD
Address C/O ALLIED PROPERTY GROUP, INC.
 12350 SW 132ND COURT SUITE 114
City-State-Zip: MIAMI FL 33186

Title SECRETARY
Name MENDOZA, THELMA
Address C/O ALLIED PROPERTY GROUP, INC.
 12350 SW 132ND COURT SUITE 114
City-State-Zip: MIAMI FL 33186

Title DIRECTOR
Name UPEGUI, CARLOS
Address C/O ALLIED PROPERTY GROUP, INC.
 12350 SW 132ND COURT SUITE 114
City-State-Zip: MIAMI FL 33186

Title VP
Name VEGA, NELSON
Address C/O ALLIED PROPERTY GROUP, INC.
 12350 SW 132 CT SUITE 114 SUITE
 114
City-State-Zip: MIAMI FL 33186

Title DIRECTOR
Name OROZCO, EFRAIN
Address C/O ALLIED PROPERTY GROUP, INC.
 12350 SW 132 CT SUITE 114 SUITE
 114
City-State-Zip: MIAMI FL 33186

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: LUZ GARCIA

PRESIDENT

02/23/2018

Electronic Signature of Signing Officer/Director Detail

Date