2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 735397

Entity Name: KENDALL HEIGHTS COMMUNITY ASSOCIATION, INC.

FILED
Apr 19, 2017
Secretary of State
CC7741481535

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 DIRECTOR Title PRESIDENT

Name GARCIA, LUZ Name BROWN, GRACE

Address C/O ALLIED PROPERTY GROUP, INC. Address C/O ALLIED PROPERTY GROUP, INC.

12350 SW 132ND COURT SUITE 114 12350 SW 132ND COURT SUITE 114

City-State-Zip: MIAMI FL 33186 City-State-Zip: MIAMI FL 33186

Title DIRECTOR Title S

Name SALDANAS , NEMROD Name STUCKI, IRENE

Address C/O ALLIED PROPERTY GROUP, INC. Address C/O ALLIED PROPERTY GROUP, INC.

12350 SW 132ND COURT SUITE 114 12350 SW 132ND COURT SUITE 114

City-State-Zip: MIAMI FL 33186 City-State-Zip: MIAMI FL 33186

Title DIRECTOR Title DIRECTOR

Name MENDOZA, THELMA Name OROZCO, EFRAIN

Address C/O ALLIED PROPERTY GROUP, INC. Address C/O ALLIED PROPERTY GROUP, INC.

12350 SW 132ND COURT SUITE 114 12350 SW 132ND COURT SUITE 114

City-State-Zip: MIAMI FL 33186 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

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: GRACE BROWN PRESIDENT 04/19/2017