

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 735397

**Entity Name:** KENDALL HEIGHTS COMMUNITY ASSOCIATION, INC.**Current Principal Place of Business:**13700 SW 62 SREET  
MIAMI, FL 33183**Current Mailing Address:**SPM GROUP INC.  
2520 NW 97TH AVE SUITE 220  
MIAMI, FL 33172 US**FEI Number:** 59-1669309**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**JOHN PAUL ARCIA, P.A.  
175 SW 7TH STREET  
SUITE 2000  
MIAMI, FL 33130 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:** JOHN PAUL ARCIA

03/14/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           SALDANAS       , NEMROD  
Address        13700 SW 62ND AVE  
                  107  
City-State-Zip: MIAMI FL 33183

Title           PRESIDENT  
Name           SILES, HECTOR  
Address        13700 SW 62ND STREET  
                  219  
City-State-Zip: MIAMI FL 33183

Title           DIRECTOR, VP  
Name           OSMAYDA , PERERA  
Address        13700 SW 62ND ST  
                  222  
City-State-Zip: MIAMI FL 33183

Title           DIRECTOR  
Name           MONTOLO, EDELSA  
Address        13700 SW 62ND STREET  
City-State-Zip: MIAMI FL 33172

Title           DIRECTOR  
Name           OROZCO, EFRAIN  
Address        13700 SW 62ND STREET  
                  235  
City-State-Zip: MIAMI FL 33183

Title           SECRETARY  
Name           ORDON, CRISTINA  
Address        13700 SW 62ND STREET  
                  112  
City-State-Zip: MIAMI FL 33183

Title           DIRECTOR  
Name           AQUILUZ, REGINA  
Address        13700 SW 62ND STREET  
                  125  
City-State-Zip: MIAMI FL 33183

Title           DIRECTOR  
Name           DESARMES, CLAUDIA V  
Address        13700 SW 62ND AVE  
                  146  
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:** HECTOR SILES

PRESIDENT

03/14/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	SANCHEZ, VIELKA
Address	13700 SW 62ND STREET 123
City-State-Zip:	MIAMI FL 33183