

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003284

Entity Name: TOWNHOMES OF KENDALL POINTE HOMEOWNERS ASSOCIATION, INC.**FILED**
Feb 17, 2017
Secretary of State
CC0130733932**Current Principal Place of Business:**6620 SOUTHPOINT DRIVE SOUTH
SUITE 610
JACKSONVILLE, FL 32216**Current Mailing Address:**6620 SOUTHPOINT DRIVE SOUTH
SUITE 610
JACKSONVILLE, FL 32216 US**FEI Number: 20-2653844****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**WASSERSTEIN, P.A.
301 YAMATO ROAD
SUITE 2199
BOCA RATON, FL 33431 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:** DANIEL WASSERSTEIN, ESQ

02/17/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	PAYNE, KUWANNANH
Address	6620 SOUTHPOINT DRIVE SOUTH SUITE 610
City-State-Zip:	JACKSONVILLE FL 32216

Title	TREASURER
Name	BAILEY, JAMIE
Address	6620 SOUTHPOINT DRIVE SOUTH SUITE 610
City-State-Zip:	JACKSONVILLE FL 32216

Title	DIRECTOR
Name	KLEINIK, DAVID
Address	6620 SOUTHPOINT DRIVE SOUTH SUITE 610
City-State-Zip:	JACKSONVILLE FL 32216

Title	VICE PRESIDENT
Name	MOORE, DOMINICA
Address	6620 SOUTHPOINT DRIVE SOUTH SUITE 610
City-State-Zip:	JACKSONVILLE FL 32216

Title	SECRETARY
Name	HURLEY, PARIS
Address	6620 SOUTHPOINT DRIVE SOUTH SUITE 610
City-State-Zip:	JACKSONVILLE FL 32216

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: DOMINICA MOORE

VICE PRESIDENT

02/17/2017

Electronic Signature of Signing Officer/Director Detail

Date