

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07432

**FILED**  
**Jan 15, 2014**  
**Secretary of State**  
**CC6046234064**

**Entity Name:** KILLIAN PROFESSIONAL VILLAGE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O MIAMI MANAGEMENT, INC.  
14275 SW 142 AVE  
MIAMI, FL 33186

**Current Mailing Address:**

C/O MIAMI MANAGEMENT, INC.  
14275 SW 142 AVE  
MIAMI, FL 33186 US

**FEI Number: 59-2553441**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

GOODMAN-GUENTHER, JOYCE  
10723 SW 104TH STREET  
MIAMI, FL 33176 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: JOYCE GOODMAN-GUENTHER**

**01/15/2014**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title S/D  
Name FREUND, IRWIN B  
Address 14275 SW 142 AVE  
City-State-Zip: MIAMI FL 33186

Title P/D  
Name DE BENEDETTO, NICK  
Address 14275 SW 142 AVE  
City-State-Zip: MIAMI FL 33186

Title D  
Name KOSTOWSKI, DOUG  
Address 14275 SW 142 AVE  
City-State-Zip: MIAMI FL 33186

Title VP/D  
Name GOODMAN-GUENTHER, JOYCE  
Address 14275 SW 142 AVE  
City-State-Zip: MIAMI FL 33186

Title T/D  
Name DE BENEDETTO, PAMELA  
Address 14275 SW 142 AVENUE  
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: PAMELA DE BENEDETTO**

**DIRECTOR**

**01/15/2014**

Electronic Signature of Signing Officer/Director Detail

Date