## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000030734

Entity Name: THE PARK AT KENDALL, LLC

**Current Principal Place of Business:** 

2199 PONCE DE LEON BLVD.

SUITE 201

CORAL GABLES, FL 33134

**Current Mailing Address:** 

P.O. BOX 3435

WEST PALM BEACH, FL 33401 US

FEI Number: 46-2225961 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS ROAD #221E

PALM BEACH GARDENS, FL 33410 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: DIANA SERRA, VICE PRESIDENT 03/29/2016

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title PRESIDENT Title OFFICER, SENIOR VICE PRESIDENT &

Name FANJUL, JOSE F. JR. TREASURER

Name BLOMQVIST, ERIK J. Address P.O. BOX 3435

Address P.O. BOX 3435 City-State-Zip: WEST PALM BEACH FL 33401

City-State-Zip: WEST PALM BEACH FL 33401

Title VP Title VF

Name HERNANDEZ, OSCAR R.

Name PORRO, JUAN C.

Address P.O. BOX 3435

Address P.O. BOX 3435

City-State-Zip: WEST PALM BEACH FL 33401 City-State-Zip: WEST PALM BEACH FL 33401

Title VICE PRESIDENT & ASSISTANT
SECRETARY
Title VICE PRESIDENT & SECRETARY

SECRETARY TITLE VICE PRESIDENT & SECRET

Name ROSS, DANIEL D. Name TABERNILLA, ARMANDO A.

Address P.O. BOX 3435 Address P.O. BOX 3435

City-State-Zip: WEST PALM BEACH FL 33401 City-State-Zip: WEST PALM BEACH FL 33401

Title VICE PRESIDENT OF TAXATION Title MANAGER

Name ZUKOWSKI, PHILIP M. Name FCI RESIDENTIAL CORPORATION

Address P.O. BOX 3435 Address 2199 PONCE DE LEON BLVD.

SUITE 201

City-State-Zip: WEST PALM BEACH FL 33401 City-State-Zip: CORAL GABLES FL 33134

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ARMANDO A. TABERNILLA VICE PRESIDENT & 03/29/2016 SECRETARY

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Mar 29, 2016

Secretary of State

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