

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 19, 2001 8:00 am
Secretary of State

01-19-2001 90013 046 ****61.25

0043793

DOCUMENT # 711672

1. Entity Name

KENDALE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

**10626 SOUTHWEST 102ND STREET
 MIAMI FL 33176**

Mailing Address

**10626 SOUTHWEST 102ND STREET
 MIAMI FL 33176**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1159493

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**LAWRENCE, DIANE
 10626 SOUTHWEST 102ND STREET
 MIAMI FL 33176**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete
 NAME GONZALEZ, GENE
 STREET ADDRESS 4630 S.W. 104TH CT.
 CITY-ST-ZIP MIAMI FL

TITLE D ☒ Delete
 NAME MANNING, ROBERT
 STREET ADDRESS 10300 S.W. 102ND AVE
 CITY-ST-ZIP MIAMI FL 33176

TITLE D ☐ Delete
 NAME LAWTON, BETTY
 STREET ADDRESS 10305 S.W. 90TH STREET
 CITY-ST-ZIP MIAMI FL

TITLE D ☐ Delete
 NAME LAWRENCE, DIANE
 STREET ADDRESS 10626 S.W. 102ND STREET
 CITY-ST-ZIP MIAMI FL

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PRES ☐ Change ☒ Addition
 NAME PETER BALJET
 STREET ADDRESS 10331 SW 102 ST.
 CITY-ST-ZIP MIAMI FL 33176

TITLE PRES ☐ Change ☒ Addition
 NAME PEGGIE B SCHULTZ
 STREET ADDRESS 10300 SW 100 AVE
 CITY-ST-ZIP MIAMI FL 33176

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/19/01 305-266-0662

CR2E037 (10/00)