

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730178

FILED
Jan 03, 2008
Secretary of State

Entity Name: PROMENADE AT KENDALE LAKES CONDOMINIUM, INC.

Current Principal Place of Business:

14325 NORTH KENDALL DRIVE
CLUBHOUSE ONE
MIAMI, FL 33186 US

New Principal Place of Business:

Current Mailing Address:

14325 NORTH KENDALL DRIVE
CLUBHOUSE ONE
MIAMI, FL 33186 US

New Mailing Address:

FEI Number: 59-1654975

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, JESUS R CAM
11936 SW 8 STREET
MIAMI, FL 33184 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P D () Delete
Name: GISBERT, MICHAEL PRES
Address: 14525 SW 88 STREET # J-405
City-St-Zip: MIAMI, FL 33186

Title: T D () Delete
Name: BOYER, FRANCOISE TRES
Address: 14525 SW 88 STREET # J-310
City-St-Zip: MIAMI, FL 33186

Title: VP D () Delete
Name: SALAS, JUAN P V.P.
Address: 14211 SW 88 STREET # E-206
City-St-Zip: MIAMI, FL 33186

Title: S D () Delete
Name: ESCALANTE, CLAUDIA SEC.
Address: 14401 SW 88 STREET # N-409
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL GISBERT

PRES

01/03/2008

Electronic Signature of Signing Officer or Director

Date