

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 735876

1. Entity Name

BIRD-KENDALL HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

11840 SW 47 STREET  
MIAMI FL 33175-4902

Mailing Address

11840 SW 47 STREET  
MIAMI FL 33175-4902

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1765654

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

7. Name and Address of New Registered Agent

WEEKS, RON  
11840 SW 47 STREET  
MIAMI FL 33175-4902

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE S ☐ Delete  
NAME PONCE, DAGNEY  
STREET ADDRESS 12120 SW 47TH ST  
CITY-ST-ZIP MIAMI FL 33175

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

TITLE VP ☐ Delete  
NAME MILLER, MICHAEL  
STREET ADDRESS 11923 SW 45TH ST  
CITY-ST-ZIP MIAMI FL 33175

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

TITLE P ☐ Delete  
NAME GOMEZ, MANNY  
STREET ADDRESS 3620 SW 108 CT.  
CITY-ST-ZIP MIAMI FL 33165

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

TITLE D ☐ Delete  
NAME SCHAFF, CHARLOTTE  
STREET ADDRESS 6901 SW 125 AVE  
CITY-ST-ZIP MIAMI FL 33183

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

TITLE T ☐ Delete  
NAME WEEKS, RON  
STREET ADDRESS 11840 S.W. 47 ST.  
CITY-ST-ZIP MIAMI FL

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

TITLE D ☐ Delete  
NAME BRADWELL, RICHARD  
STREET ADDRESS 12150 SW 45TH ST  
CITY-ST-ZIP MIAMI FL 33175

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:

*RSIGNATURE R. WEEKS*

3/9/00 305-224-7264

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)



DO NOT WRITE IN THIS SPACE