

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 06, 2009
Secretary of State

DOCUMENT# N20957

Entity Name: POINCIANA AT KENDALL HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**11750 SW 92 LANE
MIAMI, FL 33186**New Principal Place of Business:****Current Mailing Address:**400 SW 107 AVENUE
SUITE 312
MIAMI, FL 33174**New Mailing Address:****FEI Number:** 65-0057584**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**P & M MANAGEMENT SERVICES
400 SW 107 AVENUE
SUITE 312
MIAMI, FL 33174 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:** PD () Delete
Name: TERLIZZO, MARIO
Address: 11750 SW 92ND LANE
City-St-Zip: MIAMI, FL 33186**Title:** VPD () Delete
Name: SHAWWA, WAIL
Address: 11712 SW 92ND LN
City-St-Zip: MIAMI, FL 33186**Title:** SD () Delete
Name: EWING, NORMA
Address: 11776 SW 92ND LN
City-St-Zip: MIAMI, FL 33186**Title:** TD () Delete
Name: FERNANDEZ, JUAN
Address: 11800 SW 92ND LANE
City-St-Zip: MIAMI, FL 33186**Title:** D () Delete
Name: CABRERA, MAURICIO
Address: 11801 SW 92 LANE
City-St-Zip: MIAMI, FL 33186**Title:** D () Delete
Name: PITA-MARTINEZ, ROLANDO
Address: 11749 SW 92 LANE
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:** D (X) Change () Addition
Name: FERNANDEZ, JUAN
Address: 11800 SW 92ND LANE
City-St-Zip: MIAMI, FL 33186**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** T/D (X) Change () Addition
Name: PITA-MARTINEZ, ROLANDO
Address: 11749 SW 92 LANE
City-St-Zip: MIAMI, FL 33186

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: MARIO TERLIZZO

P/D

10/06/2009

Electronic Signature of Signing Officer or Director

Date