

# 2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N25214

1. Entity Name  
KENDALL SPRINGS HOMEOWNER'S ASSOCIATION, INC.



08 NOV 24 AM 10:03

CLERK OF COURT  
TALLAHASSEE, FLORIDA

Principal Place of Business  
C/O COURTESY PROPERTY MGMT  
13250 SW 135TH AVE  
MIAMI, FL 33186 US

Mailing Address  
C/O COURTESY PROPERTY MGMT  
13250 SW 135TH AVE  
MIAMI, FL 33186 US

2. Principal Place of Business - No P.O. Box #

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Miami FL

City & State

Miami FL

Zip

33183

Country

Miami Dade

Zip

33183

Country

Miami Dade

10212008

Chg-NP

CR2E037 (12/06)

4. FEI Number

65-0046318

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

PELIER, ROBERT N ESQ.  
4649 PONCE DE LEON BLVD.  
STE 305  
CORAL GABLES, FL 33146

Name

Michael E. Rehr

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

Attorney at Law

4500 S. Dadeland Blvd Ste 550

City

Miami

FL

Zip Code

33156

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Michael E. Rehr*

Michael Rehr, Attorney

11/5/08

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing  
Trust Fund Contribution.

☐

\$5.00 May Be  
Added to Fees

Make check payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE VPD  
NAME CAMPA, JULIO ☒ Delete  
STREET ADDRESS 6409 SW 132 CT. CIRCLE  
CITY-ST-ZIP MIAMI, FL 33183

TITLE PD  
NAME TUMA, MARILYN ☒ Delete  
STREET ADDRESS 6517 SW 132ND CT, CIR  
CITY-ST-ZIP MIAMI, FL 33183

TITLE TD  
NAME ASTUDILLO, MARTHA ☒ Delete  
STREET ADDRESS 6553 SW 132ND CT CIR  
CITY-ST-ZIP MIAMI, FL 33183

TITLE S  
NAME WILLIS, HENRY L ☒ Delete  
STREET ADDRESS 6535 SW 132ND CT CIR  
CITY-ST-ZIP MIAMI, FL 33183

TITLE D  
NAME ENCINOSA, XAVIER ☒ Delete  
STREET ADDRESS 6541 SW 132ND CT CIR  
CITY-ST-ZIP MIAMI, FL 33183

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VPD ☐ Change ☒ Addition  
NAME Prats, Alba Luz  
STREET ADDRESS 6520 S.W. 132 CrT Circle  
CITY-ST-ZIP Miami, FL 33183

TITLE PD ☐ Change ☒ Addition  
NAME Astudillo Martha T.  
STREET ADDRESS 6553 S.W. 132 CrT Circle  
CITY-ST-ZIP Miami, FL 33183

TITLE TD ☐ Change ☒ Addition  
NAME Willis Henry L  
STREET ADDRESS 6535 S.W. 132 CrT Circle  
CITY-ST-ZIP Miami, FL 33183

TITLE SD ☐ Change ☒ Addition  
NAME Campa Julio  
STREET ADDRESS 6409 S.W. 132 CrT Circle  
CITY-ST-ZIP Miami, FL 33183

TITLE D ☐ Change ☒ Addition  
NAME Romero Waldina  
STREET ADDRESS 6447 SW 132 CrT Circle  
CITY-ST-ZIP Miami, FL 33183

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 exemptions contained 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 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: *Martha T. Astudillo* Martha T. Astudillo President 10/22/08  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

11/25/08