

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25214

FILED
Jan 14, 2009
Secretary of State

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

Current Principal Place of Business:

6470 S.W. 132 CRT CIR
MIAMI, FL 33183 US

New Principal Place of Business:

Current Mailing Address:

6470 S.W. 132 CRT CIR
MIAMI, FL 33183 US

New Mailing Address:

FEI Number: 65-0046318 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

REHR, MICHAEL E ATTN
9500 S. DADELAND BLVD.
STE 550
MIAMI, FL 33156 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: VPD () Delete
Name: PRATS, ALBA LUZ
Address: 6520 S.W. 132 CRT CIRCLE
City-St-Zip: MIAMI, FL 33183 US

Title: PD () Delete
Name: ASTUDILLO, MARTHA J
Address: 6553 S.W. 132 CRT CIRCLE
City-St-Zip: MIAMI, FL 33183 US

Title: SD () Delete
Name: CAMPA, JULIO
Address: 6409 S.W. 132 CT, CIRCLE
City-St-Zip: MIAMI, FL 33183 US

Title: TD () Delete
Name: WILLIS, HENRY L
Address: 6535 S.W. 132 CT, CIRCLE
City-St-Zip: MIAMI, FL 33183

Title: D () Delete
Name: WALDINA, ROMERO
Address: 6447 S.W. 132 CT, CIRCLE
City-St-Zip: MIAMI, FL 33183 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: ASTUDILLO, MARTHA T
Address: 6553 S.W. 132 CRT CIRCLE
City-St-Zip: MIAMI, FL 33183 US

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: MARTHA T. ASTUDILLO

PRES

01/14/2009

Electronic Signature of Signing Officer or Director

Date