


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 25, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # N30727**

1. Entity Name  
 KILLIAN PLACE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business  
 9716 SW 110 ST  
 MIAMI, FL 33176 US

Mailing Address  
 P O BOX 165823  
 MIAMI, FL 33116-5823 US

**DO NOT WRITE IN THIS SPACE**



01072008 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0105374	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

ROSENTHAL, ALAN  
 4TH FLOOR  
 2525 PONCE DE LEON BOULEVARD  
 MIAMI, FL 33134

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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

**Filing Fee is \$61.25**  
**Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SHERIN, RICHARD 9764 S.W. 110 ST. MIAMI, FL 33176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GARDNER, DAVID 9716 S.W. 110 ST. MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MADRAZO, ANDRES 9868 SW 111 TERRACE MIAMI, FL 33176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GREEN, JANET 9816 SW 110 STREET MIAMI, FL 33176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD GONZALEZ, GERMAN JR 9834 SW 111 TERRACE MIAMI, FL 33176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CANIZARES, ROY 9750 SW 111 TERRACE MIAMI, FL 33176

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 01/29/08-80079-013 61.25

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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: Richard J. Sherin, Treas. 1/21/2008  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

#1833  
 RICHARD SHERIN