

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000514

FILED
Apr 21, 2009
Secretary of State

Entity Name: KENDALE WOODS NORTH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O LAKEVIEW MANAGEMENT, INC.
13388 SW 128 STREET
MIAMI, FL 33186

New Principal Place of Business:

C/O PRESTIGE ASSOCIATION CONSULTANTS, INC
6215 SW 138 CT
MIAMI, FL 33183

Current Mailing Address:

C/O LAKEVIEW MANAGEMENT, INC.
13388 SW 128 STREET
MIAMI, FL 33186

New Mailing Address:

KENDALE WOODS NORTH CONDOMINIUM ASSOC
13831 SW 59 ST #105
MIAMI, FL 33183

FEI Number: 59-2659353

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MITZENMACHER, MARGIE
13388 SW 128 STREET
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

FLOREZ, LESLIE L PA
782 NW LEJUNE ROAD
350
MIAMI, FL 33126 US

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: LESLIE L. FLOREZ

04/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MANRESA, MARIO
Address: 6321 SW 138 CT #4
City-St-Zip: MIAMI, FL 33183

Title: T () Delete
Name: AYESA, JOSE
Address: 6325 SW 138 CT #7
City-St-Zip: MIAMI, FL 33183

Title: D () Delete
Name: RODRIGUEZ, NILSA
Address: 6335 SW 138 CT #3
City-St-Zip: MIAMI, FL 33183

Title: T (X) Delete
Name: OCHMANSKI, MATHEW
Address: 6315 SW 138 CT., #3
City-St-Zip: MIAMI, FL 33183

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GOMEZ, FABIOLA
Address: 13831 SW 59 ST #105
City-St-Zip: MIAMI, FL 33183

Title: T (X) Change () Addition
Name: MONZON, YODAYME
Address: 13831 SW 59 ST #105
City-St-Zip: MIAMI, FL 33183

Title: VP/S (X) Change () Addition
Name: CALLEJA, LENA
Address: 13831 SW 59 ST #105
City-St-Zip: MIAMI, FL 33183

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: FABIOLA GOMEZ

PRES

04/21/2009

Electronic Signature of Signing Officer or Director

Date