

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734381

Entity Name: KENDALE LAKES ELEMENTARY PARENTS AND TEACHERS, INC.**FILED**
Apr 14, 2023
Secretary of State
4798367065CC**Current Principal Place of Business:**8000 SW 142 AVE
MIAMI, FL 33183**Current Mailing Address:**8000 SW 142 AVE
MIAMI, FL 33183**FEI Number: 59-2078311****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**ARIAS, NORA M. PRESIDENT
8000 SW 142 AVE
MIAMI, FL 33183 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: NORA ARIAS****04/14/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** PRESIDENT
Name ARIAS, NORA MELISSA
Address 8000 SW 142 AVE
City-State-Zip: MIAMI FL 33183**Title** FIRST VP
Name RAMOS, ADIREM
Address 8000 SW 142 AVE
City-State-Zip: MIAMI FL 33183**Title** SECOND VP
Name ORTEGA, BARBARA
Address 8000 SW 142 AVE
City-State-Zip: MIAMI FL 33183**Title** FUNDRAISING COORDINATOR
Name MOATS, CINDY
Address 8000 SW 142 AVE
City-State-Zip: MIAMI FL 33183**Title** PARLIAMENTARIAN
Name WESTON, SHARLENE
Address 8000 SW 142 AVE
City-State-Zip: MIAMI FL 33183**Title** ASST. SECRETARY
Name GONZALEZ, SAHILY
Address 8000 SW 142 AVE
City-State-Zip: MIAMI FL 33183**Title** TREASURER
Name USCATEGUI, JOAN
Address 8000 SW 142 AVE
City-State-Zip: MIAMI FL 33183**Title** SECRETARY
Name GONZALEZ, MELISSA
Address 8000 SW 142 AVENUE
City-State-Zip: MIAMI FL 33183**Continues on page 2**

I hereby 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 all other like empowered.

SIGNATURE: NORA ARIAS**PRESIDENT****04/14/2023**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

| | |
|-----------------|--------------------|
| Title | ASST. TREASURER |
| Name | TIBEIRO, KATIANA |
| Address | 8000 SW 142 AVENUE |
| City-State-Zip: | MIAMI FL 33183 |