## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000008295

FILED Apr 30, 2007 Secretary of State

Entity Name: THE ENCLAVE AT ISLES AT BAYSHORE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

13055 SW 42ND ST STE 203 C/O M & E ASSOCIATES OF MIAMI, INC. MIAMI, FL 33175

13055 SW 42ND ST SUITE 203

MIAMI, FL 33175

**Current Mailing Address:** New Mailing Address:

730 N.W. 107 AVENUE 13055 SW 42 STREET FOURTH FLOOR SUITE 203

MIAMI, FL 33172 MIAMI, FL 33175

FEI Number: 20-3320553 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PATRICIA KIMBALL FLETCHER, P.A. SKRLD, INC 201 ALHAMBRA CIRCLE, 730 N.W. 107 AVENUE

FOURTH FLOOR SUITE 1102 MIAMI, FL 33172 US CORAL GABLES, FL, FL 33134 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: LISA LERNER 04/30/2007

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

HENDERSON, MERCEDES HONDA, MAGGI Name: Name:

730 N.W. 107 AVENUE FOURTH FLOOR Address: 22432 SW 93 PASSAGE Address: City-St-Zip: MIAMI, FL 33172 City-St-Zip: MIAMI, FL 33190

Title: VD () Delete Title: (X) Change ( ) Addition

MCPHERSON, GREG Name: CEDERBERG, LUCIANE Name: Address: 730 N.W. 107 AVENUE FOURTH FLOOR Address: 22476 SW 94 PLACE City-St-Zip: MIAMI, FL 33172 City-St-Zip: MIAMI, FL 33190

Title: STD () Delete Title: (X) Change ( ) Addition AVILA, MIGUEL Name: ESPINOSA, RENE Name:

730 N.W. 107 AVENUE FOURTH FLOOR 9414 SW 224 TERRACE Address: Address: City-St-Zip: MIAMI, FL 33172 City-St-Zip: MIAMI, FL 33190

Title: () Delete Title: ( ) Change (X) Addition

Name: Name: PRENDERGAST, LINDA 22535 SW 94 PLACE Address: Address: MIAMI, FL 33190 City-St-Zip: City-St-Zip:

Title: () Delete Title: ( ) Change (X) Addition

IGLESIAS, AXEL Name: Name: 22441 SW 93 PASSAGE Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33190

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: LINDA PRENDERGAST Т 04/30/2007