

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000004732

**Entity Name:** ENCLAVE SUBDIVISION PROPERTY OWNERS ASSOCIATION, INC.

**FILED**  
**Feb 09, 2017**  
**Secretary of State**  
**CC8343713664**

**Current Principal Place of Business:**

4928 S.W. 19TH PL.  
CAPE CORAL, FL 33914

**Current Mailing Address:**

4925 SW 20TH AVENUE  
CAPE CORAL, FL 33914 US

**FEI Number: 05-0548474**

**Certificate of Status Desired: No**

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

HEARYMAN, LESLIE  
4916 SW 19TH PLACE  
CAPE CORAL, FL 33914 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 HEARYMAN

02/09/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            CURASCO, PERRY  
Address        4937 SW 20TH AVENUE  
City-State-Zip: CAPE CORAL FL 33914

Title            TREASURER  
Name            HERZOG, SUSAN  
Address        4936 SW 19TH PLACE  
City-State-Zip: CAPE CORAL FL 33914

Title            SECRETARY  
Name            SIMMS, RON  
Address        4921 SW 20TH AVENUE  
City-State-Zip: CAPE CORAL FL 33914

*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:** PERRY CURASCO

PRESIDENT

02/09/2017

Electronic Signature of Signing Officer/Director Detail

Date