	cipal Place of Business: DD LAKES BLVD 4104		9133923	
Current Mai	ling Address:			
1295 WILDW NAPLES, FI	/OOD LAKES BLVD _ 34104			
FEI Number: 20-3072023		Certificate of Status Desired: No		
Name and A	ddress of Current Registered Agent:			
	CZYK, DEBOEST & CROSS, PLLC DEL SOL WAY 109 US			
The above named	entity submits this statement for the purpose of changing its regis	stered office or regis	tered agent, or both, in the State of Floric	la.
SIGNATURE: STEVE ADAMCZYK				
SIGNATURE	STEVE ADAMCZYK			01/11/2019
SIGNATURE	Electronic Signature of Registered Agent			01/11/2019 Date
SIGNATURE Officer/Direc	Electronic Signature of Registered Agent			
	Electronic Signature of Registered Agent	Title	SECRETARY	
Officer/Diree	Electronic Signature of Registered Agent	Title Name		
Officer/Dire	Electronic Signature of Registered Agent ctor Detail : PRESIDENT		SECRETARY	
Officer/Dire Title Name	Electronic Signature of Registered Agent Ctor Detail : PRESIDENT JANESKI, KATHLEEN 1295 WILDWOOD LAKES BLVD	Name	SECRETARY CAMPBELL, DOUGLAS 1230 WILDWOOD LAKES BLVD	
Officer/Dire Title Name Address	Electronic Signature of Registered Agent Ctor Detail : PRESIDENT JANESKI, KATHLEEN 1295 WILDWOOD LAKES BLVD	Name Address	SECRETARY CAMPBELL, DOUGLAS 1230 WILDWOOD LAKES BLVD	
Officer/Direc Title Name Address City-State-Zip:	Electronic Signature of Registered Agent Ctor Detail : PRESIDENT JANESKI, KATHLEEN 1295 WILDWOOD LAKES BLVD NAPLES FL 34104	Name Address	SECRETARY CAMPBELL, DOUGLAS 1230 WILDWOOD LAKES BLVD	
Officer/Direc Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent Ctor Detail : PRESIDENT JANESKI, KATHLEEN 1295 WILDWOOD LAKES BLVD NAPLES FL 34104 TREASURER, VP	Name Address	SECRETARY CAMPBELL, DOUGLAS 1230 WILDWOOD LAKES BLVD	
Officer/Direc Title Name Address City-State-Zip: Title Name Address	Electronic Signature of Registered Agent Ctor Detail : PRESIDENT JANESKI, KATHLEEN 1295 WILDWOOD LAKES BLVD NAPLES FL 34104 TREASURER, VP ROSA, JAMES	Name Address	SECRETARY CAMPBELL, DOUGLAS 1230 WILDWOOD LAKES BLVD	

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: KATHLEEN JANESKI

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

01/11/2019

Date

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0500001038

Entity Name: ENCLAVE AT NAPLES CONDOMINIUM ASSOCIATION, INC.

FILED Jan 11, 2019 **Secretary of State** 9135992568CC