

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000011789

**Entity Name:** JARDIN CONDOMINIUM ASSOCIATION XIX, INC.**Current Principal Place of Business:**190 JARDIN DE MER PL  
JACKSONVILLE BEACH, FL 32250**Current Mailing Address:**197 JARDIN DE MER PL  
JACKSONVILLE BEACH, FL 32250**FEI Number:** 45-4800626**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JAMES, DEMAIO III  
191 JARDIN DE MER PLACE  
JACKSONVILLE BEACH, FL 32250 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:** JAMES DEMAIO III

04/24/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PRES  
Name GRIESBAUM, CAROL S  
Address 197 JARDIN DE MER PL  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title OWNER  
Name HUGHES, CHARLES M  
Address 194 JARDIN DE MER PL  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title OWNER  
Name FANTON, WALTER A  
Address 193 JARDIN DE MER PL  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title TREA  
Name DEMAIO, JAMES III  
Address 191 JARDIN DE MER PL  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title OWNER  
Name BURKETT, CHARLES W  
Address 198 JARDIN DE MER PL  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title OWNER  
Name FIELDS, GARY T  
Address 192 JARDIN DE MER PL  
City-State-Zip: JACKSONVILLE BEACH FL 32250

*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:** JAMES DEMAIO, III**MEMBER**

04/24/2014

Electronic Signature of Signing Officer/Director Detail

Date