	Connotomy of Ctoto
Entity Name: EAST NEIGHBORHOOD ASSOCIATION OF WILTON MANOR INC.	S, Secretary of State CC7109811857
Current Principal Place of Business:	
1708 NE 24 STREET	
WILTON MANORS, FL 33305	
Current Mailing Address:	
1708 NE 24 STREET	
WILTON MANORS, FL 33305 US	
FEI Number: 16-1635725 Cer	tificate of Status Desired: No
Name and Address of Current Registered Agent:	
CLARK, CAROL	
1708 NE 24 STREET	
WILTON MANORS, FL 33305 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	CAROL CLARK			03/23/2016
	Electronic Signature of Registered Agent			Date
Officer/Direc	ctor Detail :			
Title	PRESIDENT	Title	TREA	
Name	FIORE, JOHN	Name	CLARK, CAROL	
Address	2450 NE 15 AVENUE, #210	Address	1708 NE 24 STREET	
City-State-Zip:	WILTON MANORS FL 33305	City-State-Zip:	WILTON MANORS FL 33305	
Title	DIR	Title	DIR	
Name	NIXON, MARTIN	Name	LEIXNER, TIMOTHY	
Address	1708 NE 24 STREET	Address	2201 N. E. 17TH TERRACE	
City-State-Zip:	WILTON MANORS FL 33305	City-State-Zip:	WILTON MANORS FL 33305	
Title	DIR	Title	DIRECTOR	
Name	DEUTCH, BARRY	Name	COMER, RANDY	
Address	1708 NE 24 STREET	Address	2318 NE 15 TERRACE	
City-State-Zip:	WILTON MANORS FL 33305	City-State-Zip:	WILTON MANORS FL 33305	
Title	SECRETARY			
Name	DEGROOT, JOHN			
Address	1708 NE 24 STREET			
City-State-Zip:	WILTON MANORS FL 33305			

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: CAROL CLARK

TREASURER

03/23/2016

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 23. 2016

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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