

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17001

Entity Name: THE ENCLAVE AT JACARANDA LAKES HOMEOWNERS' ASSOCIATION, INC.**FILED**
Jan 26, 2016
Secretary of State
CC0012424061**Current Principal Place of Business:**8751 W BROWARD BLVD
400
PLANTATION, FL 33324**Current Mailing Address:**P.O. BOX 19439
PLANTATION, FL 33318**FEI Number: 59-2776795****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**THE RAPACKÉ LAW GROUP, P.A.
618 EAST SOUTH STREET
SUITE 500
ORLANDO, FL 32801 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: ANDREW RAPACKÉ****01/26/2016**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :Title DIR
Name SOMMER, ARIAD
Address 9340 NW 10 COURT
City-State-Zip: PLANTATION FL 33322Title DIR
Name EGGELLETION, III, JOSEPHUS
Address 1011 NW 93 TERR
City-State-Zip: PLANTATION FL 33322Title DIR/SEC
Name PEREZ, LISA
Address 9337 NW 10 STREET
City-State-Zip: PLANTATION FL 33322Title DIR
Name RAPACKÉ, ANDREW
Address 9330 NW 10 COURT
City-State-Zip: PLANTATION FL 33322Title DIR/TREAS
Name TALVITIE, HEIKKI
Address 1061 NW 93 AVE
City-State-Zip: PLANTATION FL 33322Title DIR/PRES
Name HILAL, ELIAS
Address 1021 NW 93 TERR
City-State-Zip: PLANTATION FL 33322Title DIR/VP
Name BARTH, RYAN
Address 9343 NW 10 ST
City-State-Zip: PLANTATION FL 33322

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: ELIAS HILAL**PRESIDENT****01/26/2016**

Electronic Signature of Signing Officer/Director Detail

Date