2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9700000308

Entity Name: ENCANTADA AT PEMBROKE PINES COMMUNITY

ASSOCIATION, INC.

Current Principal Place of Business:

C/O FEIN & MELONI, ESQS. 900 S.W. 40TH AVENUE PLANTATION, FL 33317

Current Mailing Address:

C/O FEIN & MELONI, ESQS. 900 S.W. 40TH AVENUE PLANTATION, FL 33317

FEI Number: 65-0888213 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PEMBROKE PINES FL 33332

MELONI, EDOARDO ESQ. 900 S.W. 40TH AVENUE PLANTATION, FL 33317 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

FILED Apr 15, 2013

Secretary of State

CC3378187275

Officer/Director Detail:

Title PD Title ST, TREASURER

Name MENDEZ, JOE Name KOVACSIK, JACQUELINE

Address C/O PINES PROPERTY MGMT Address C/O PINES PROPERTY MGMT

6941 SW 196 AVE, SUITE 27 6941 SW 196 AVE, SUITE 27

City-State-Zip:

PEMBROKE PINES FL 33332

Title DD Title VD

Name DUNN, GAYON Name ALOY, NELSON

Address C/O PINES PROPERTY MGMT Address C/O PINES PROPERTY MGMT

6941 SW 196 AVE, SUITE 27 6941 SW 196 AVE, SUITE 27

City-State-Zip: PEMBROKE PINES FL 33332 City-State-Zip: PEMBROKE PINES FL 33332

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: JOE MENDEZ PD

Electronic Signature of Signing Officer/Director Detail

04/15/2013 Date