

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000037757

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

**Entity Name:** ENCLAVE BY THE SEA, LLC

**Current Principal Place of Business:**

5240 S UNIVERSITY DRIVE  
SUITE 102  
DAVIE, FL 33328

**New Principal Place of Business:**

**Current Mailing Address:**

5240 S UNIVERSITY DRIVE  
SUITE 102  
DAVIE, FL 33328

**New Mailing Address:**

**FEI Number:** 20-4670108

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

THOMAS O. WELLS, P.A.  
540 BILTMORE WAY  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** CAMET, EDUARDO  
**Address:** 5240 S UNIVERSITY DRIVE #102  
**City-St-Zip:** DAVIE, FL 33328

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: EDUARDO CAMET

MGRM

04/24/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date