2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 10, 2006 8:00 am
Secretary of State
04-21-2006 90103 020 ****61.25

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1. Entity Name
THE ENCLAVE AT PALMIRA NEIGHBORHOOD ASSOCIATION, INC.

Principal Place of Business	Mailing Address
28341 S. TAMIAMI TRAIL BOINTA SPRINGS, FL 34134	10621 AIRPORT PULLING RD N SUITE 8 NAPLES, FL 34109

01162006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
28164 San Lucas Ln.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Bonita Springs, FL	City & State
Zip 34135 Country Lee	Zip Country

4. FEI Number 59-3749030 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MATHIASON, MARION P 500 EAST KENNEDY BOULEVARD SUITE 200 TAMPA, FL 33602	Name Robert P. Titus Street Address (P.O. Box Number is Not Acceptable) American Property Mgt 10621 Airport-Pulling Rd, N #8 City Naples FL Zip Code 34109

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ Robert P. Titus 4/7/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25 **Due by May 1, 2006**	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	**Make check payable to Florida Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP GRASSER, MARK 28341 S. TAMIAMI TRAIL #1 BOINTA SPRINGS, FL 34134	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Susan Palmer 28022 San Lucas Lane #202 Bonita Springs FL 34135	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NOLAN, ED 28341 S. TAMIAMI TRAIL BOINTA SPRINGS, FL 34134	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Richard Vaden 28017 San Lucas Lane #202 Bonita Springs FL 34135	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MAYOTTE, BRIAN 28341 S. TAMIAMI TRAIL BOINTA SPRINGS, FL 34134	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary/Treasurer Kajel Schildell 28066 San Lucas Lane #201 Bonita Springs, FL 34135	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AST KOLEGUE, KENT 10621 AIRPORT PULLING RD N SUITE 8 NAPLES, FL 34109	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 4/7/06 239 596 1886
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #