

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010932

FILED
Feb 28, 2009
Secretary of State

Entity Name: THE ENCLAVE PROPERTY OWNERS' ASSOCIATION II, INC.

Current Principal Place of Business:

4140 ENCLAVE PL
CHARLOTTE HARBOR, FL 33980

New Principal Place of Business:

4140 ENCLAVE PL
CHARLOTTE HARBOR, FL 33980 US

Current Mailing Address:

100 SULLIVAN STREET
112
PUNTA GORDA, FL 33950

New Mailing Address:

100 SULLIVAN STREET
112
PUNTA GORDA, FL 33950 US

FEI Number: 34-1976227

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENE, JOAN E
100 SULLIVAN S7
STE. 112
PUNTA GORDA, FL 33950 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: QUICKNER, JENNIFER
Address: 2909 CREEK SIDE DR
City-St-Zip: CLEVELAND, TN 37312 US

Title: TD () Delete
Name: ZALUD, CONNIE
Address: 4911 POST POINTE DR
City-St-Zip: SARASOTA, FL 34233 US

Title: SD () Delete
Name: HATTON, SHIRLEY
Address: 4170 ENCLAVE PALCE
City-St-Zip: PUNTA GORDA, FL 33980 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BUCKNER, JENNIFER
Address: 202 HIGH STREET
City-St-Zip: BELL BUCKLE, TN 37020 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JENNIFER BUCKNER

PRES

02/28/2009

Electronic Signature of Signing Officer or Director

Date