

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008930

FILED  
Aug 04, 2008  
Secretary of State

**Entity Name:** THE ENCLAVE AT PALMIRA V CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2220 J AND C BLVD  
SUITE 1  
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

2220 J AND C BLVD  
SUITE 1  
NAPLES, FL 34109

**New Mailing Address:**

**FEI Number:** 20-1655325      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

C & L MANAGEMENT SERVICES  
2220 J AND C BLVD  
SUITE 1  
NAPLES, FL 34109 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: SCHURDELL, KAROL  
Address: 28666 SAN LUCAS LANE #201  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VP ( ) Delete  
Name: RIVERA, LUIS F  
Address: 28652 SAN LUCAS LN SUITE 102  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: ST ( ) Delete  
Name: LENZI, DONNA  
Address: 28657 SAN LUCAS LN SUITE 202  
City-St-Zip: BONITA SPRINGS, FL 34135

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: SCHURDELL, KAREL  
Address: 28666 SAN LUCAS LANE #201  
City-St-Zip: BONITA SPRINGS, FL 34135

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: KAREL SCHURDELL

PD

08/04/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date