## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000003908

FILED Feb 18, 2009 Secretary of State

Entity Name: THE ENCLAVE II AT SOUTH MIAMI CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Plac	New Principal Place of Business:	
	31ST AVENUE			
OX 7 OUTH M	IAMI, FL 33143			
	lailing Address		New Mailing Addre	ess:
541 SW 6	61ST AVENUE			
OX 7				
	IAMI, FL 33143			
El Number:	: 20-4888321	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
ame and	l Address of Cu	urrent Registered Agent:	Name and Address	s of New Registered Agent:
	E, AIMEE G 81ST AVE UNIT 33143 US	3		
	e named entity si e of Florida.	ubmits this statement for the p	ourpose of changing its registe	red office or registered agent, or both,
the State	e of Florida.	ubmits this statement for the p	ourpose of changing its registe	red oπice or registered agent, or both,
the State	e of Florida. RE:	ubmits this statement for the p c Signature of Registered Ago		red oπice or registered agent, or both,  Date
the State	e of Florida. RE:	c Signature of Registered Age	ent	
the State	e of Florida. RE: Electronic S AND DIRECT	c Signature of Registered Age T <b>ORS:</b> Delete EE AVE UNIT 3	ent	 Date
the State IGNATUF FFICER: tle: ame: ddress:	e of Florida.  RE: Electronic  S AND DIRECT  PD ()I  OSBORNE, AIME 7541 SW 61 ST  MIAMI, FL 3314	c Signature of Registered Age  ORS:  Delete  EE  AVE UNIT 3 3  Delete	ent  ADDITIONS/CHAN  Title: Name: Address:	Date  GES TO OFFICERS AND DIRECTOR
the State IGNATUR  FFICERS tle: ame: ddress: tty-St-Zip: tle: ame: ddress:	e of Florida.  RE: Electronic  S AND DIRECT  PD ()I  OSBORNE, AIME 7541 SW 61 ST  MIAMI, FL 3314  VD ()I  LUZKO, NANCY 7541 SW 61ST A  MIAMI, FL 3319	c Signature of Registered Age  ORS:  Delete EE AVE UNIT 3 3  Delete  AVE UNIT 6 3  Delete	ent  ADDITIONS/CHAN  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date  GES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition

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: GRETEL B. NORWEB TD 02/18/2009