2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004512

FILED Apr 02, 2009 Secretary of State

Entity Name: ENCLAVE AT THE PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

20690 NW 15TH AVENUE MIAMI GARDENS, FL 33169

Current Mailing Address: New Mailing Address:

20690 NW 15TH AVENUE MIAMI GARDENS, FL 33169

FEI Number: 20-2833463 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GLAZER AND ASSOCIATES, P.A.

MICHAEL W. GOMEZ, ESQUIRE
1920 E. HALLANDALE BEACH BLVD

HALLANDALE, FL 33009 US

MICHAEL W. GOMEZ, ESQUIRE
1930 TYLER STREET

HOLLYWOOD, FL 33020 US

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: MICHAEL GOMEZ 04/02/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: MUFUTAU MURPHY, FOLORUNSHO Name: RODRIGUEZ, CARLOS

 Address:
 20690 NW 15TH AVE
 Address:
 20690 NW 15TH AVENUE

 City-St-Zip:
 MIAMI, FL 33169
 City-St-Zip:
 MIAMI, FL 33169

Title: VP () Delete Title: () Change () Addition

 Name:
 PEAUTEAU, MADEGE
 Name:

 Address:
 20690 NW 15TH AVE
 Address:

 City-St-Zip:
 MIAMI, FL 33169
 City-St-Zip:

Title: T (X) Delete Title: () Change () Addition

 Name:
 DIXON, NICOLE
 Name:

 Address:
 20520 NW 15TH AVE 122
 Address:

 City-St-Zip:
 MIAMI, FL 33169
 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: NADEGE PEAUTEAU VP 04/02/2009