

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000010734

**FILED**  
**Jan 19, 2012**  
**Secretary of State**

**Entity Name:** THE ENCLAVE AT WILTON MANORS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O SWIFT MANAGEMENT  
7150 UNIVERSITY DRIVE # 205  
CORAL SPRINGS, FL 33071 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O SWIFT MANAGEMENT  
7150 UNIVERSITY DRIVE # 205  
CORAL SPRINGS, FL 33071 US

**New Mailing Address:**

**FEI Number:** 26-0561683

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SWIFT MANAGEMENT  
1750 UNIVERSITY DRIVE  
SUITE #205  
CORAL SPRINGS, FL 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: D  
Name: RODRIGUEZ, OMAR  
Address: 625 NW 28TH AVENUE  
City-St-Zip: WILTON MANORS, FL 33311 US

Title: D  
Name: MOCK, GRACE  
Address: 6418 BRENTWOOD DRIVE  
City-St-Zip: SPRINGFIELD, VA 22152 US

I hereby 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 all other like empowered.

SIGNATURE: OMAR RODRIGUEZ

D

01/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date