## 2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N06000011789

FILED Mar 15, 2012 Secretary of State

Entity Name: JARDIN CONDOMINIUM ASSOCIATION XIX, INC.

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

10161 CENTURION PKWY NORTH STE 150 190 JARDIN DE MER PL

JACKSONVILLE, FL 32256 JACKSONVILLE BEACH, FL 32250

Current Mailing Address: New Mailing Address:

10161 CENTURION PKWY NORTH STE 150 197 JARDIN DE MER PL

JACKSONVILLE, FL 32256 JACKSONVILLE BEACH, FL 32250

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

KENNEY, THERESA M ESQ GRIESBAUM, CAROL S 4348 SOUTHPOINT BLVD. 197 JARDIN DE MER PL

SUITE 101 JACKSONVILLE BEACH, FL 32250 US JACKSONVILLE, FL 32216 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: CAROL S GRIESBAUM 03/15/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PRES

Name: GRIESBAUM, CAROL S Address: 197 JARDIN DE MER PL

City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: TREA

Name: DEMAIO, JAMES III Address: 191 JARDIN DE MER PL

City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: OWNR

Name: HUGHES, CHARLES M Address: 194 JARDIN DE MER PL

City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: OWNR

Name: BURKETT, CHARLES W Address: 198 JARDIN DE MER PL

City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: OWNR

Name: FANTON, WALTER A Address: 193 JARDIN DE MER PL

City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: OWNR

Name: FIELDS, GARY T Address: 192 JARDIN DE MER PL

City-St-Zip: JACKSONVILLE BEACH, FL 32250

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: CAROL S GRIESBAUM PRES 03/15/2012

Electronic Signature of Signing Officer or Director

Date