

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17001

FILED
Apr 11, 2009
Secretary of State

Entity Name: THE ENCLAVE AT JACARANDA LAKES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

8360 W OAKLAND PARK BLVD
301
FORT LAUDERDALE, FL 33351

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 452119
SUNRISE, FL 333452199

New Mailing Address:

FEI Number: 59-2776795

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOTTLIEB, HOWARD A
9354 NW 10TH STREET
PLANTATION, FL 33322 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 () Delete
Name: ARENBERG, SCOTT F
Address: 9331 NW 10TH STREET
City-St-Zip: PLANTATION, FL 33322

Title: D () Delete
Name: DEBROKA, JOHN
Address: 4310 NW 10TH CT
City-St-Zip: PLANTATION, FL 33322

Title: S () Delete
Name: HYMES, SUSAN
Address: 1840 NW 93RD AVE
City-St-Zip: FORT LAUDERDALE, FL 33322

Title: P () Delete
Name: GOTTLIEB, HOWARD
Address: 9354 NW 10TH ST
City-St-Zip: FORT LAUDERDALE, FL 33322

Title: T () Delete
Name: SILVERMAN, MARC
Address: 9337 NW 10TH ST
City-St-Zip: FORT LAUDERDALE, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: HOWARD A. GOTTLIEB

PRES

04/11/2009

Electronic Signature of Signing Officer or Director

_____ Date