# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 05, 2012**
**Secretary of State**

DOCUMENT# N29745

**Entity Name:** ENCLAVE COMMUNITY PROPERTY ASSOCIATION, INC.

**Current Principal Place of Business:**

215 GRAND BLVD.
SUITE 200
MIRAMAR BEACH, FL 32550 US

**New Principal Place of Business:**

**Current Mailing Address:**

215 GRAND BLVD
SUITE 200
MIRAMAR BEACH, FL 32550 US

**New Mailing Address:**

**FEI Number: 59-2503063** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

NEWMAN, RAYMOND F JR.
348 S.W. MIRACLE STRIP PARKWAY
SUITE 7
FORT WALTON BEACH, FL 32548 US

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

BECKER & POLIAKOFF, P.A.
348 S.W. MIRACLE STRIP PARKWAY
SUITE 7
FORT WALTON BEACH, FL 32548 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: JAY ROBERTS, ESQ. 01/05/2012
Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:**

Title: DP
Name: CAIN, CONNIE
Address: 215 GRAND BLVD SUITE 200
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: DV
Name: ROGGEN, CAROLYN
Address: 215 GRAND BLVD SUITE 200
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: DS
Name: TRAGER, MITCHELL
Address: 215 GRAND BLVD SUITE 200
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: DT
Name: MARTIN, ROBERT
Address: 215 GRAND BLVD SUITE 200
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: D
Name: BLIMLING, SAM
Address: 215 GRAND BLVD SUITE 200
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: D
Name: BURKE, STEVEN
Address: 215 GRAND BLVD SUITE 200
City-St-Zip: DESTIN, FL 32550 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: CONNIE CAIN DP 01/05/2012
Electronic Signature of Signing Officer or Director Date