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FILED

Apr 30 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000082420 (8)

1. Corporation Name

ENCLAVE AT THE FOUNTAINS, INC.

Principal Place of Business

135 S.E. FIFTH AVE., SUITE 200
DELRAY BEACH FL 33483

Mailing Address

135 S.E. FIFTH AVE., SUITE 200
DELRAY BEACH FL 33483-5256

2. Principal Place of Business

21 675 E. Clearbrook Circle

Suite, Apt. #, etc.

22

City & State

23 Delray Beach, FL

Zip

24 33445

Country

25 USA

2a. Mailing Address

26 675 E. Clearbrook Circle

Suite, Apt. #, etc.

27

City & State

28 Delray Beach, FL

Zip

29 33445

Country

30 USA

9. Name and Address of Current Registered Agent

GUARDIAN CONSTRUCTION CORP
135 SE 5TH AVE
DELRAY BEACH FL 33483

3. Date Incorporated or Qualified

11/03/1994

3a. Date of Last Report

04/10/1996

4. FEI Number

65-0534741

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

10. Name and Address of New Registered Agent

81 Name

Guardian Construction Corp

82 Street Address (P.O. Box Number is Not Acceptable)

675 E. Clearbrook Circle

83

84

City

Delray Beach

FL

85 Zip Code

33445

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

(NOTE: Registered Agent signature required when reinstating)

2/13/97

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D EISENROD, SOLOMON
STREET ADDRESS 135 S.E. FIFTH AVE., SUITE 200
CITY-ST-ZIP DELRAY BEACH FL 33483

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

[Signature]



CR2E034 (9/96)