

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 727835

**Entity Name:** ESTANCIA HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Apr 30, 2016**  
**Secretary of State**  
**CC6175376319**

**Current Principal Place of Business:**

% MANAGE SMART LLC  
1730 S. FEDERAL HWY. #336  
DELRAY BEACH, FL 33483

**Current Mailing Address:**

% MANAGE SMART LLC  
1730 S. FEDERAL HWY. #336  
DELRAY BEACH, FL 33483 US

**FEI Number: 59-1672014**

**Certificate of Status Desired: No**

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

KRAVIT LAW  
7000 W. PALMETTO ROAD  
SUITE 210  
BOCA RATON, FL 33433 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: CORY KRAVIT**

**04/30/2016**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VICE PRESIDENT, DIRECTOR  
Name MERCADO, ROBERTO  
Address % MANAGE SMART LLC  
1730 S. FEDERAL HWY. #336  
City-State-Zip: DELRAY BEACH FL 33483

Title SECRETARY, DIRECTOR  
Name SIPPLE, ELENA  
Address % MANAGE SMART LLC  
1730 S. FEDERAL HWY. #336  
City-State-Zip: DELRAY BEACH FL 33483

Title PRESIDENT, DIRECTOR  
Name GOSDORFER, CAROLYN  
Address % MANAGE SMART LLC  
1730 S. FEDERAL HWY. #336  
City-State-Zip: DELRAY BEACH FL 33483

Title VICE PRESIDENT, DIRECTOR  
Name WASSERMAN, JACI  
Address % MANAGE SMART LLC  
1730 S. FEDERAL HWY. #336  
City-State-Zip: DELRAY BEACH FL 33483

Title TREASURER, DIRECTOR  
Name KIRKCONNELL, BRYAN  
Address % MANAGE SMART LLC  
1730 S. FEDERAL HWY. #336  
City-State-Zip: DELRAY BEACH FL 33483

*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: CAROLYN GOSDORFER**

**MANAGER**

**04/30/2016**

Electronic Signature of Signing Officer/Director Detail

Date