

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003794

Entity Name: JASMINE POINTE AT CARLTON LAKES, INC.

Current Principal Place of Business:

C/O CAMBRIDGE PROPERTY MANAGEMENT
2335 TAMIAMI TRAIL NORTH SUITE 402
NAPLES, FL 34103

Current Mailing Address:

C/O CAMBRIDGE PROPERTY MANAGEMENT
2335 TAMIAMI TRAIL NORTH SUITE 402
NAPLES, FL 34103 US

FEI Number: 33-1085550

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAMBRIDGE MANAGEMENT
C/O CAMBRIDGE PROPERTY MANAGEMENT
2335 TAMIAMI TRAIL NORTH SUITE 402
NAPLES, FL 34103 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: AUTUMN SPRUILL

03/30/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name NOREN, CAROLE
Address 2335 TAMIAMI TRAIL NORTH
 SUITE 402
City-State-Zip: NAPLES FL 34103

Title TREASURER
Name ELSESSER, GARY
Address 2335 TAMIAMI TRAIL NORTH
 SUITE 402
City-State-Zip: NAPLES FL 34103

Title DIRECTOR
Name RICHARDS, AL
Address 2335 TAMIAMI TRAIL NORTH
 SUITE 402
City-State-Zip: NAPLES FL 34103

Title SECRETARY
Name JOHNSON, DEBRAH
Address 2335 TAMIAMI TRAIL NORTH
 SUITE 402
City-State-Zip: NAPLES FL 34103

Title VP
Name VITALE, ANTHONY
Address C/O CAMBRIDGE PROPERTY
 MANAGEMENT
 2335 TAMIAMI TRAIL NORTH SUITE
 402
City-State-Zip: NAPLES FL 34103

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: CAROLE NOREN

PRESIDENT

03/30/2017

Electronic Signature of Signing Officer/Director Detail

Date