2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 05, 2015
Secretary of State
CC4799932854

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Entity Name: JASMINE POINTE AT CARLTON LAKES, INC.

Current Principal Place of Business:

%GULF BREEZE MGMT SVCS, INC.
8910 TERRENE CT,, STE 200
BONITA SPRINGS, FL 34135

Current Mailing Address:

%GULF BREEZE MGMT SVCS, INC.
8910 TERRENE CT,, STE 200
BONITA SPRINGS, FL 34135 US

FEI Number: 33-1085550

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WEIDNER, RALPH L
%GULF BREEZE MGMT SVCS, INC.
8910 TERRENE CT,, STE 200
BONITA SPRINGS, FL 34135 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PD	Title	TD
Name	NOREN, CAROLE	Name	LAKE, THALIA
Address	8910 TERRENE COURT, SUITE 200	Address	8910 TERRENE COURT, SUITE 200
City-State-Zip:	BONITA SPRINGS FL 34135	City-State-Zip:	BONITA SPRINGS FL 34135
Title	D	Title	SD
Name	RICHARDS, ALLEN	Name	SABIN, JUDY
Address	8910 TERRENE COURT, SUITE 200	Address	8910 TERRENE COURT, SUITE 200
City-State-Zip:	BONITA SPRINGS FL 34135	City-State-Zip:	BONITA SPRINGS FL 34135
Title	VD		
Name	JOHNSON, DEBORAH		
Address	8910 TERRENE COURT, SUITE 200		
City-State-Zip:	BONITA SPRINGS FL 34135		

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 06/05/2015

Electronic Signature of Signing Officer/Director Detail — Date