

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011789

Entity Name: JARDIN CONDOMINIUM ASSOCIATION XIX, INC.**Current Principal Place of Business:**190 JARDIN DE MER PL
JACKSONVILLE BEACH, FL 32250**Current Mailing Address:**197 JARDIN DE MER PL
JACKSONVILLE BEACH, FL 32250**FEI Number:** 45-4800626**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JAMES, DEMAIO III
191 JARDIN DE MER PLACE
JACKSONVILLE BEACH, FL 32250 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:** JAMES DEMAIO III

04/28/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRES
Name	GRIESBAUM, CAROL S
Address	197 JARDIN DE MER PL
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	TREA
Name	DEMAIO, JAMES III
Address	191 JARDIN DE MER PL
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	OWNR
Name	HUGHES, CHARLES M
Address	194 JARDIN DE MER PL
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	OWNR
Name	BURKETT, CHARLES W
Address	198 JARDIN DE MER PL
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	OWNR
Name	FANTON, WALTER A
Address	193 JARDIN DE MER PL
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	OWNR
Name	FIELDS, GARY T
Address	192 JARDIN DE MER PL
City-State-Zip:	JACKSONVILLE BEACH FL 32250

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: JAMES DEMAIO III

TREA

04/28/2015

Electronic Signature of Signing Officer/Director Detail

Date