

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

DOCUMENT# N40322

**FILED**  
**Mar 03, 2016**  
**Secretary of State**  
**CC1938842407**

**Entity Name:** ALADDIN PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

5013 SE SCHOONER OAKS WAY  
STUART, FL 34997-2552

**Current Mailing Address:**

5013 SE SCHOONER OAKS WAY  
STUART, FL 34997-2552 US

**FEI Number:** 65-0328337

**Certificate of Status Desired:** No

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

JULIAN, CAROLINE ATREASUR  
5013 SE. SCHOONER OAKS WAY  
STUART, FL 34997 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            PRES  
Name            SINCLAIR, ERIKA  
Address        4957 SE. SCHOONER OAKS WAY  
City-State-Zip: STUART FL 34997-2552

Title            VP  
Name            MARTLAND, THOMAS  
Address        4902 SE. SCHOONER OAKS WAY  
City-State-Zip: STUART FL 34997

Title            SEC  
Name            SINCLAIR, ERIKA  
Address        4957 SE. SCHOONER OAKS WAY  
City-State-Zip: STUART FL 34997

Title            TREASURER  
Name            JULIAN, CAROLINE A. MRS.  
Address        5013 SE SCHOONER OAKS WAY  
City-State-Zip: STUART FL 34997-2552

*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:** CAROLINE A. JULIAN

**TREASURER**

**03/03/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date