

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000112556

**Entity Name:** THE ENCLAVE V LLC

**Current Principal Place of Business:**

7657 NW 42ND PLACE  
168  
SUNRISE, FL 33351

**Current Mailing Address:**

7657 NW 42ND PLACE  
168  
SUNRISE, FL 33351

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

SOENEN, LUC  
7657 NW 42ND PLACE,  
168  
SUNRISE, FL 33322 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

**Authorized Person(s) Detail :**

Title MGRM  
Name SOENEN, LUC  
Address 7657 NW 42ND PLACE, APT 168  
City-State-Zip: SUNRISE FL 33351

Title MGR  
Name SOENEN, MARIE CLAUDE  
Address 7657 NW 42ND PLACE, APT 168  
SUNRISE  
City-State-Zip: SUNRISE FL 33351

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MARIE CLAUDE SOENEN

**MANAGER**

**03/28/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date