2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737021

FILED May 01, 2006 Secretary of State

Entity Name: BAYBERRY POINT AT JACARANDA HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 980 BAYBERRY POINT DRIVE PLANTATION, FL 33324 **Current Mailing Address: New Mailing Address:** 980 BAYBERRY POINT DRIVE PLANTATION, FL 33324 FEI Number: 59-1769171 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GRAMPA, ROBERT J PD 980 BAYBERRY POINT DRIVE PLANTATION, FL 33324 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition GRAMPA, ROBERT J PD Name: Name: Address: 980 BAYBERRY POINT DRIVE Address: City-St-Zip: PLANTATION, FL 33324 US City-St-Zip: Title: VD () Delete Title: () Change () Addition Name: HELLING, JERRY VD Name: Address: 9551 PARK LANE Address: City-St-Zip: PLANTATION, FL 33324 US City-St-Zip: Title: () Delete Title: () Change () Addition MINKIN, MARSHA SD Name: Name: 1060 BAYBERRY POINT DRIVE Address: Address: City-St-Zip: PLANTATION, FL 33324 US City-St-Zip: Title: TD () Delete Title: () Change () Addition Name: SKILES, KAREN TD Name: 900 BAYBERRY POINT DRIVE Address: Address: City-St-Zip: PLANTATION, FL 33324 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT J. GRAMPA PD 05/01/2006