

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737021

FILED
Apr 13, 2009
Secretary of State

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

Current Principal Place of Business:

900 BAYBERRY POINT DRIVE
PLANTATION, FL 33324 US

New Principal Place of Business:

940 BAYBERRY POINT DRIVE
PLANTATION, FL 33324 US

Current Mailing Address:

900 BAYBERRY POINT DRIVE
PLANTATION, FL 33324 US

New Mailing Address:

940 BAYBERRY POINT DRIVE
PLANTATION, FL 33324 US

FEI Number: 59-1769171

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKILES, DAVID PD
900 BAYBERRY POINT DRIVE
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

HODISH, RICHARD PD
940 BAYBERRY POINT DRIVE
PLANTATION, FL 33324 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: RICHARD HODISH

04/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SKILES, DAVID
Address: 900 BAYBERRY POINT DRIVE
City-St-Zip: PLANTATION, FL 33324 US

Title: TD () Delete
Name: KHAKHRIA, MILAN
Address: 920 BAYBERRY POINT DRIVE
City-St-Zip: PLANTATION, FL 33324 US

Title: SD () Delete
Name: HODISH, RICHARD
Address: 940 BAYBERRY POINT DRIVE
City-St-Zip: PLANTATION, FL 33324 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: SKILES, DAVID
Address: 900 BAYBERRY POINT DRIVE
City-St-Zip: PLANTATION, FL 33324 US

Title: TD (X) Change () Addition
Name: FROHME, LORAL
Address: 941 BAYBERRY POINT DRIVE
City-St-Zip: PLANTATION, FL 33324 US

Title: PD (X) Change () Addition
Name: HODISH, RICHARD
Address: 940 BAYBERRY POINT DRIVE
City-St-Zip: PLANTATION, FL 33324 US

I hereby certify that the information supplied with this filing does not qualify 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: LORAL FROHME

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04/13/2009

Electronic Signature of Signing Officer or Director

Date