

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 27, 2008  
Secretary of State**

DOCUMENT# 755666

Entity Name: JACARANDA COUNTRY CLUB VILLAS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1162 INDIAN HILL BLVD  
VENICE, FL 34293 US

**New Principal Place of Business:**

**Current Mailing Address:**

1162 INDIAN HILL BLVD  
VENICE, FL 34293 US

**New Mailing Address:**

FEI Number: 59-2274795      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

KEYS CALDWELL, INC  
1162 INDIAN HILL BLVD  
VENICE, FL 34293 US

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

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:**

Title: PD ( ) Delete  
Name: GENTRY, LAVERNE  
Address: 826 COUNTY CLUBN CIRCLE  
City-St-Zip: VENICE, FL 34293

Title: SD ( ) Delete  
Name: MERCER POULOS, JEANNE  
Address: 906 COUNTRY CLUB CIRCLE  
City-St-Zip: VENICE, FL 34293

Title: TD ( ) Delete  
Name: LISTON, JUDY  
Address: 831 COUNTRY CLUB CIR  
City-St-Zip: VENICE, FL 34293

Title: VD ( ) Delete  
Name: FRANCIS, LARRY  
Address: 822 COUNTRY CLUB CIR  
City-St-Zip: VENICE, FL 34293

Title: D ( ) Delete  
Name: NORRIS, LARRY  
Address: 903 COUNTRY CLUB CIRCLE  
City-St-Zip: VENICE, FL 34293

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VD (X) Change ( ) Addition  
Name: GENTRY, LAVERNE  
Address: 826 COUNTY CLUBN CIRCLE  
City-St-Zip: VENICE, FL 34293

Title: SD (X) Change ( ) Addition  
Name: SNELL, LEE  
Address: 827 COUNTRY CLUB CIRCLE  
City-St-Zip: VENICE, FL 34293

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PD (X) Change ( ) Addition  
Name: FRANCIS, LARRY  
Address: 822 COUNTRY CLUB CIR  
City-St-Zip: VENICE, FL 34293

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ROY FRANCIS

PRES

04/27/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date