## 2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Apr 17, 2007 8:00 am Secretary of State DOCUMENT # N10555 1. Entity Name 04-17-2007 90053 024 \*\*\*\*61.25 CALICO COUNTRY-TAMARAC HOMEOWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address % J & L PROPERTY MGMT., INC. 10191 W. SAMPLE RD SUITE 2058 % J & L PROPERTY MGMT., INC. 10191 W. SAMPLE RD SUITE 205B CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) Applied For City & State City & State 4. FEI Number 59-2562041 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CALDERAZZO, JAMES Street Address (P.O. Box Number is Not Acceptable) % J & L PROPERTY MGMT., INC 10191 W. SAMPLE RD. SUITE 205B **CORAL SPRINGS FL 33065** Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title it applicable FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. VΡ ☐ Change THEF Delete HHE ☐ Addition NAME NAME LEVEY, BILL STREET ADDRESS STREET ADDRESS 7668 NW 88 LANE CHY-SI-7IP CITY - ST-ZIP TAMARAC FL 33321 Change TITLE Delete TITLE Addition NAME NAME BJORKGREN, BARBARA STREET ADDRESS 8805 N.W. 76TH ST STREET ADDRESS CITY SE-7E CITY-ST-7/P TAMARAC FL TITLE ☐ Delete THE Change ☐ Addition NAME NAMi CAVAWAUGH, DIANE STREET ADDRESS STREET ADDRESS 8870 NW 76 DR CITY - ST-ZIP CITY-ST-7IP TAMARAC FL 33321 ☐ Chance ШЦ Delete TITLE ☐ Addition NAM NAME GOVIN, PATRICIA STREET ADDRESS STREET ADDRESS 7673 NW 88 LANE CITY - ST - ZIP CITY-S1-ZIP TAMARAC FL 33321 ☐ Delete ☐ Change ☐ Addition TATLE TITLE NAME PAZOS, RAMON NAME STREET ADDRESS 7653 NW 88 LANE STREET ADDRESS TAMARAC FL 33321 CITY-ST-ZIP CITY - ST-ZIP TITLE HARUGU 7EIDGOLD □ Delete TITLE VP ☐ Change Addition NAME NAME HARVEY FEINGOLD THAT NW BOTH CIRCLE STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 1.19, Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or direction 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 in Block 10 or Block 11 if changed, or on an attachmont with an address, with all other like empowered

CHY-SI- ZIP

SIGNATURE:

CITY - ST- ZIP

FILED