

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2005 8:00 am
Secretary of State

02-11-2005 90026 048 ****61.25

DOCUMENT # N31789

1. Entity Name
**THE WINDS AT JACARANDA HOMEOWNERS'
ASSOCIATION, INC.**



Principal Place of Business
**C/O DOVERNE PROPERTIES, INC.
15092 SW 36 ST.
DAVIE, FL 33331 US**

Mailing Address
**C/O DOVERNE PROPERTIES, INC.
15092 SW 36 ST.
DAVIE, FL 33331 US**



2. Principal Place of Business

8360 W Oakland Park Blvd

Suite, Apt. #, etc.
301

City & State
Sunrise FL

Zip
33351

Country
USA

3. Mailing Address

PO Box 452199

Suite, Apt. #, etc.

City & State
Sunrise, FL

Zip
33345-2199

Country
USA

01032005 Chg-NP CR2E037 (10/03)

4. FEI Number
65-0365353

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**JENNINGS & VALANCY, P.A.
311 SE 13TH STREET
ATTN: STEVEN S. VALANCY
FORT LAUDERDALE, FL 33316**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
SHCILLING, RUSSELL L
10969 W BROWARD BLVD.
PLANTATION, FL 33324**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
PETTIT, DAVIO
10951 W BROWARD BLVD.
PLANTATION, FL 33324**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
JACKSON, KEITH
10973 W BROWARD BLVD.
PLANTATION, FL 33324**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
PEREZ, ZENIA
10903 W. BROWARD BLVD
PLANTATION, FL 33324**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SHEA, RICHARD
10915 W BROWARD BLVD.
PLANTATION, FL 33324**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D/VP

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D/P

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Zenia Perez - President 2/7/05 954-572-5900