

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31789

FILED
Apr 11, 2009
Secretary of State

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

Current Principal Place of Business:

8360 W OAKLAND PARK BLVD
301
SUNRISE, FL 33351 US

New Principal Place of Business:

1133 S. UNIVERSITY DRIVE
STE. 211
PLANTATION, FL 33324 US

Current Mailing Address:

POB 452199
FORT LAUDERDALE, FL 333452199 US

New Mailing Address:

POB 19439
PLANTATION, FL 33318 US

FEI Number: 65-0365353

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAKALAR & EICHNER, PA
150 S PINE ISLAND RD 540
FORT LAUDERDALE, FL 33324 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: DT () Delete
Name: SHCILLING, RUSSELL L
Address: 10969 W BROWARD BLVD.
City-St-Zip: PLANTATION, FL 33324

Title: DVP () Delete
Name: ZDANOQICZ, TARA
Address: 10983 W BROWARD BLVD
City-St-Zip: FORT LAUDERDALE, FL 33324

Title: S () Delete
Name: JACKSON, KEITH
Address: 10973 W BROWARD BLVD.
City-St-Zip: PLANTATION, FL 33324

Title: DP () Delete
Name: PEREZ, ZENIA
Address: 10903 W. BROWARD BLVD
City-St-Zip: PLANTATION, FL 33324

Title: D () Delete
Name: SHEA, RICHARD
Address: 10915 W BROWARD BLVD.
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change () Addition
Name: SCHILLING, RUSSELL L
Address: 10969 W BROWARD BLVD.
City-St-Zip: PLANTATION, FL 33324

Title: DVP (X) Change () Addition
Name: ZDANOWICZ, TARA
Address: 10983 W BROWARD BLVD
City-St-Zip: FORT LAUDERDALE, FL 33324

Title: DP (X) Change () Addition
Name: JACKSON, KEITH
Address: 10973 W BROWARD BLVD.
City-St-Zip: PLANTATION, FL 33324

Title: DS (X) Change () Addition
Name: PEREZ, ZENIA
Address: 10903 W. BROWARD BLVD
City-St-Zip: PLANTATION, FL 33324

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: Z PEREZ

DS

04/11/2009

Electronic Signature of Signing Officer or Director

Date