

2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Jan 25, 2008 8:00 am**  
**Secretary of State**

01-25-2008 90025 006 \*\*\*\*61.25

DOCUMENT # 729491

1. Entity Name  
JACARANDA WEST HOMEOWNERS' ASSOCIATION #1,  
INC.



Principal Place of Business  
LIGHTHOUSE PROPERTY MGMT  
16 CHURCH ST.  
OSPREY, FL 34229 US

Mailing Address  
LIGHTHOUSE PROPERTY MGMT  
16 CHURCH ST.  
OSPREY, FL 34229 US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address **ARGUS**

**ARGUS MANAGEMENT OF VENICE**

**MANAGEMENT OF VENICE**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**181 CENTER RD**

**181 CENTER RD**

City & State

City & State

**VENICE, FL**

**VENICE, FL**

Zip

Country

Zip

Country

**34285**

**US**

**34293**

**US**

01172008

Chg-NP

CR2E037 (12/06)

4. FEI Number  
**59-1786896**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LOBECK & HANSON  
ATTN: DAN LOBECK  
2033 MAIN STREET #403  
SARASOTA, FL 34237

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, 2008

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
FORD, PAUL T  
1027 KINGS CT.  
VENICE, FL 34293 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
WHITE, David J.  
915 DORAL LANE S.  
VENICE, FL 34293 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
PIACQUADIO, SHITLEY  
1623 BOB O LINK DRIVE  
VENICE, FL 34293 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DVP  
PIACQUADIO, Shirley  
1623 BOB O LINK DR  
VENICE, FL 34293 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DT  
JAECK, WILLIAM  
1937 COVE POINTE DR  
VENICE, FL 34293 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
JAECK, WILLIAM C.  
1937 COVE POINTE DR  
VENICE, FL 34293 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DVP  
SHAND, ROBERT  
849 COUNTRY CLUB CIR  
VENICE, FL 34293 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
SHAND, ROBERT  
849 COUNTRY CLUB CIRCLE  
VENICE, FL 34293 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
KRUM, STEPHEN  
2044 OAKRIDGE CIR.  
VENICE, FL 34293 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
RUBBRIGHT, VIRGINIA L.  
1027 BURNING OAK CT  
VENICE, FL 34293 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
PURDY, ROBERT  
924 DORAL LANE S.  
VENICE, FL 34293 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DT  
PURDY, ROBERT  
924 DORAL LANE S.  
VENICE, FL 34293 ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

*William C. Jaeck*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/08 941-492-9147

Date

Daytime Phone #