

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003954

FILED
Apr 12, 2011
Secretary of State

Entity Name: SANTA CRUZ HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3600 S. CONGRESS AVE
K
BOYNTON BEACH, FL 33426 US

New Principal Place of Business:

123 NORTH CONGRESS AVENUE
#343
BOYNTON BEACH, FL 33426 US

Current Mailing Address:

3600 S. CONGRESS AVE
K
BOYNTON BEACH, FL 33426 US

New Mailing Address:

123 NORTH CONGRESS AVENUE
#343
BOYNTON BEACH, FL 33426 US

FEI Number: 65-0627753

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

APOGEE ASSOCIATION SERVICES, LLC
3600 S CONGRESS AVE
K
BOYNTON BEACH, FL 33426 US

Name and Address of New Registered Agent:

JAN PROPERTY MANAGEMENT, INC.
123 NORTH CONGRESS AVENUE
#343
BOYNTON BEACH, FL 33426 US

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: STEVEN R. WORRALL

04/12/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: PORTA, FRANK
Address: 3600 S. CONGRESS AVE STE K
City-St-Zip: BOYNTON BEACH, FL 33426 US

Title: VPD
Name: SMITH, RAY
Address: 3600 S. CONGRESS AVE STE K
City-St-Zip: BOYNTON BEACH, FL 33426 US

Title: S
Name: GORDON, CAROL
Address: 3600 S. CONGRESS AVE STE K
City-St-Zip: BOYNTON BEACH, FL 33426 US

Title: D
Name: KURTZ, DEBBIE
Address: 3600 S. CONGRESS AVE STE K
City-St-Zip: BOYNTON BEACH, FL 33426 US

Title: D
Name: DUNFORD, MARTY
Address: 3600 S. CONGRESS AVE STE K
City-St-Zip: BOYNTON BEACH, FL 33426 US

Title: D
Name: KATZ, FRAN
Address: 3600 S. CONGRESS AVE STE K
City-St-Zip: BOYNTON BEACH, FL 33426 US

I hereby 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 all other like empowered.

SIGNATURE: FRANK PORTA

PD

04/12/2011

Electronic Signature of Signing Officer or Director

Date