

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 726824

**Entity Name:** VANGUARD VILLAGE #15 HOMEOWNERS MAINTENANCE ASSOCIATION, INC.

**FILED**  
**Mar 21, 2023**  
**Secretary of State**  
**0675302610CC**

**Current Principal Place of Business:**

10191 W. SAMPLE RD.  
SUITE #203  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

10191 W. SAMPLE RD.  
SUITE #203  
CORAL SPRINGS, FL 33065 US

**FEI Number: 59-1467067**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CALDERAZZO, JAMES  
J & L PROPERTY MGMT  
10191 W. SAMPLE RD. #203  
CORAL SPRINGS, FL 33065 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name NOURI, NOUR  
Address 10191 W SAMPLE RD  
203  
City-State-Zip: CORAL SPRINGS FL 33065

Title VP  
Name GEREZ, GEORGE  
Address 10191 W SAMPLE RD  
203  
City-State-Zip: CORAL SPRINGS FL 33065

Title SECRETARY  
Name KHAN, ZAID  
Address 10191 W SAMPLE RD  
203  
City-State-Zip: CORAL SPRINGS FL 33065

Title D  
Name ROCHESTER, EILEEN (GRACE)  
Address 10191 W SAMPLE RD  
203  
City-State-Zip: CORAL SPRINGS FL 33065

Title DIRECTOR  
Name PERSINER, DONNA  
Address 10191 W SAMPLE RD  
203  
City-State-Zip: CORAL SPRINGS FL 33065

Title DIRECTOR  
Name BLANKENBICKER, PATRICK  
Address 10191 W SAMPLE RD  
203  
City-State-Zip: CORAL SPRINGS FL 33065

Title TREASURER  
Name FOX, FELICIA  
Address 10191 W SAMPLE RD  
203  
City-State-Zip: CORAL SPRINGS FL 33065

Title DIRECTOR  
Name GRIMES, SUSAN ANN  
Address 10191 W SAMPLE RD  
203  
City-State-Zip: CORAL SPRINGS FL 33065

**Continues on page 2**

*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: NOUR NOURI**

**P**

**03/21/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           KELLY-RAMSON, LAVORIS  
Address        10191 W SAMPLE RD  
                  203  
City-State-Zip: CORAL SPRINGS FL 33065

Title           DIRECTOR  
Name           JASSO, FERNANADO  
Address        10191 W. SAMPLE RD.  
                  203  
City-State-Zip: CORAL SPRINGS FL 33065