2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2017
Secretary of State
CC3446795298

DOCUMENT# 729491

Entity Name: JACARANDA WEST HOMEOWNERS' ASSOCIATION #I, INC.

Current Principal Place of Business:

5602 MARQUESAS CIRCLE
#103
SARASTOA, FL 34233

Current Mailing Address:

P.O. BOX 18809
SARASOTA, FL 34276 US

FEI Number: 59-1786896

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SUNSTATE ASSOCIATION MANAGEMENT GROUP
5602 MARQUESAS CIRCLE
#103
SARASTOA, FL 34233 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	DIRECTOR
Name	MILLER, ED
Address	P.O. BOX 18809
City-State-Zip:	SARASOTA FL 34276

Title	PRESIDENT
Name	O'NEILL, PATRICIA
Address	P.O. BOX 18809
City-State-Zip:	SARASOTA FL 34276

Title	VP
Name	O'NEIL, FRED
Address	P.O. BOX 18809
City-State-Zip:	SARASOTA FL 34276

Title	DIRECTOR
Name	ROSSETTI, FRANK
Address	P.O. BOX 18809
City-State-Zip:	SARASOTA FL 34276

Title	DIRECTOR
Name	KRUM, STEVE
Address	P.O. BOX 18809
City-State-Zip:	SARASOTA FL 34276

Title	DIRECTOR
Name	DUMAINE , FRANK
Address	P.O. BOX 18809
City-State-Zip:	SARASOTA FL 34276

Title	SECRETARY
Name	HARRINGTON, CLAYTON
Address	P.O. BOX 18809
City-State-Zip:	SARASOTA FL 34276

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: CLAYTON HARRINGTON SECRETARY 03/01/2017

Electronic Signature of Signing Officer/Director Detail — Date