

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 729491

**FILED**  
**Feb 12, 2015**  
**Secretary of State**  
**CC1821748707**

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

**Current Principal Place of Business:**

SUNSTATE ASSOCIATION MANAGEMENT GROUP  
5602 MARQUESAS CIRCLE 102-9  
SARASTOA, FL 34233

**Current Mailing Address:**

SUNSTATE ASSOCIATION MANAGEMENT GROUP  
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  
102-9  
SARASOTA, 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 SUNSTATE ASSOCIATION  
MANAGEMENT GROUP  
5602 MARQUESAS CIRCLE 102-9  
City-State-Zip: SARASOTA FL 34233

Title PRESIDENT  
Name O'NEILL, PATRICIA  
Address SUNSTATE ASSOCIATION  
MANAGEMENT GROUP  
5602 MARQUESAS CIRCLE 102-9  
City-State-Zip: SARASOTA FL 34233

Title S  
Name O'NEIL, FRED  
Address SUNSTATE ASSOCIATION  
MANAGEMENT GROUP  
5602 MARQUESAS CIRCLE 102-9  
City-State-Zip: SARASOTA FL 34233

Title DIRECTOR  
Name ROSSETTI, FRANK  
Address SUNSTATE ASSOCIATION  
MANAGEMENT GROUP  
5602 MARQUESAS CIRCLE 102-9  
City-State-Zip: SARASOTA FL 34233

Title VP, DIRECTOR  
Name KRUM, STEVE  
Address SUNSTATE ASSOCIATION  
MANAGEMENT GROUP  
5602 MARQUESAS CIRCLE  
City-State-Zip: SARASOTA FL 34233

Title DIRECTOR  
Name DIEHL, RICHARD  
Address SUNSTATE ASSOCIATION  
MANAGEMENT GROUP  
5602 MARQUESAS CIRCLE  
City-State-Zip: SARASOTA FL 34233

Title DIRECTOR  
Name GRISWOLD, ROGER  
Address SUNSTATE ASSOCIATION  
MANAGEMENT GROUP  
5602 MARQUESAS CIRCLE 102-9  
City-State-Zip: SARASOTA FL 34233

*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:** FRED O'NEIL

**SECRETARY**

**02/12/2015**

