

**2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 732720

**Entity Name:** THE VILLAGE TOWNHOUSES-JACARANDA, INC.

**FILED  
Aug 29, 2017  
Secretary of State  
CC5447316775**

**Current Principal Place of Business:**

C/O ASSOCIATION SERVICES OF FLORIDA  
10112 USA TODAY WAY  
MIRAMAR, FL 33025

**Current Mailing Address:**

C/O ASSOCIATION SERVICES OF FLORIDA  
10112 USA TODAY WAY  
MIRAMAR, FL 33025 US

**FEI Number: 59-1724350**

**Certificate of Status Desired: No**

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

ANTHONY ACCETTA, P.A.  
200 SOUTH BISCAYNE BLVD.  
2930  
MIAMI, FL 33131 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            PRESIDENT  
Name            WEBSTER, LAURA  
Address        C/O ASSOCIATION SERVICES OF  
                  FLORIDA  
                  10112 USA TODAY WAY  
City-State-Zip: MIRAMAR FL 33025

Title            SECRETARY  
Name            FESMIRE, MARY SUE  
Address        C/O ASSOCIATION SERVICES OF  
                  FLORIDA  
                  10112 USA TODAY WAY  
City-State-Zip: MIRAMAR FL 33025

Title            VP  
Name            LACEY, WILLIAM  
Address        C/O ASSOCIATION SERVICES OF  
                  FLORIDA  
                  10112 USA TODAY WAY  
City-State-Zip: MIRAMAR FL 33025

Title            TREASURER  
Name            ASCH, MARKUS  
Address        C/O ASSOCIATION SERVICES OF  
                  FLORIDA  
                  10112 USA TODAY WAY  
City-State-Zip: MIRAMAR FL 33025

*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: LAURA WEBSTER**

**PRESIDENT**

**08/29/2017**

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

\_\_\_\_\_  
Date