

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

DOCUMENT# 756525

**FILED**  
**Mar 24, 2023**  
**Secretary of State**  
**3215851632CC**

**Entity Name:** ROLLING HILLS GOLF AND TENNIS CLUB CONDOMINIUM I ASSOCIATION, INC.

**Current Principal Place of Business:**

3001 W ROLLING HILLS CIRCLE  
DAVIE, FL 33328

**Current Mailing Address:**

C/O PROPERTY KEEPERS MANAGEMENT, LLC  
6555 POWERLINE RD SUITE 105  
FORT LAUDERDALE, FL 33309 US

**FEI Number:** 59-2065952

**Certificate of Status Desired:** No

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

LANDOL LAW FIRM  
LANDOL LAW FIRM  
2101 NW CORPORATE BLVD. SUITE 410  
BOCA RATON, FL 33431 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:** SAM LANDOL

03/24/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            LEPAGE, SHARI  
Address        6555 POWERLINE RD  
                  SUITE 105  
City-State-Zip: FORT LAUDERDALE FL 33309

Title            VP  
Name            ZACUR, BASEL  
Address        6555 POWERLINE RD  
                  SUITE 105  
City-State-Zip: FORT LAUDERDALE FL 33309

Title            TREASURER  
Name            MUSLERA, MARIA  
Address        6555 POWERLINE RD  
                  SUITE 105  
City-State-Zip: FORT LAUDERDALE FL 33309

Title            SECRETARY  
Name            DURDEN, ANITA  
Address        6555 POWERLINE RD  
                  SUITE 105  
City-State-Zip: FORT LAUDERDALE FL 33309

Title            DIRECTOR  
Name            JASPARRO, FRANK  
Address        6555 POWERLINE RD SUITE 105  
City-State-Zip: FORT LAUDERDALE FL 33309

*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:** SHARI LEPAGE

**PRESIDENT**

03/24/2023

Electronic Signature of Signing Officer/Director Detail

Date