

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

DOCUMENT# N03000001993

**Entity Name:** COURTYARDS AT JACARANDA CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Mar 23, 2017**  
**Secretary of State**  
**CC3987498011**

**Current Principal Place of Business:**

140 S JACARANDA CC DR  
PLANTATION, FL 33324

**Current Mailing Address:**

140 S JACARANDA CC DR  
PLANTATION, FL 33324 US

**FEI Number: 56-2519030**

**Certificate of Status Desired: No**

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

FOGARTY, WILLIAM H  
120 S JACARANDA CC DR  
104  
PLANTATION, FL 33324 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 DT  
Name FOGARTY, WILLIAM H  
Address 120 S JACARANDA CC DR #104  
City-State-Zip: PLANTATION FL 33324

Title DP  
Name LASH, HARRIS  
Address 160 S JACARANDA CC DR #103  
City-State-Zip: PLANTATION FL 33324

Title DS  
Name SHERWIN, LEVY  
Address 130 S JACARANDA CC DRIVE # 100  
City-State-Zip: PLANTATION FL 33323

Title D  
Name OLGA, OCAMPO  
Address 100 S JACARANDA CC DRIVE # 206  
City-State-Zip: PLANTATION FL 33324

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: WILLIAM H FOGARTY**

**TREASURER**

**03/23/2017**

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

\_\_\_\_\_  
Date