

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000001993

**Entity Name:** COURTYARDS AT JACARANDA CONDOMINIUM ASSOCIATION, INC.**FILED**  
**Apr 13, 2021**  
**Secretary of State**  
**8661473096CC****Current Principal Place of Business:**140 JACARANDA COUNTRY CLUB DRIVE  
PLANTATION, FL 33324**Current Mailing Address:**140 JACARANDA COUNTRY CLUB DRIVE  
PLANTATION, FL 33324 US**FEI Number: 56-2519030****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**FOGARTY, WILLIAM H  
120 JACARANDA COUNTRY CLUB 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 JACARANDA COUNTRY CLUB DR 104
City-State-Zip:	PLANTATION FL 33324

Title	DP
Name	LASH, HARRIS
Address	2641 GATELY DRIVE W 902
City-State-Zip:	WEST PLAM BEACH FL 33415

Title	DS
Name	SHERWIN, LEVY
Address	130 JACARANDA COUNTRY CLUB DRIVE 100
City-State-Zip:	PLANTATION FL 33323

Title	DIRECTOR
Name	GIAMMATTEI, MARIA
Address	130 JACARANDA COUNTRY CLUB DRIVE 206
City-State-Zip:	PLANTATION FL 33324

Title	DIRECTOR
Name	RADZIOWON, ALLAN
Address	110 JACARANDA COUNTRY CLUB DRIVE 102
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****DIRECTOR/TREASURER****04/13/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date