

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

DOCUMENT# N99000003869

**FILED**  
**Mar 13, 2017**  
**Secretary of State**  
**CC0120490059**

**Entity Name:** SONOMA HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

10191 W. SAMPLE ROAD  
SUITE 203  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

10191 W. SAMPLE ROAD  
SUITE 203  
CORAL SPRINGS, FL 33065

**FEI Number:** 65-0949109

**Certificate of Status Desired:** No

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

J&L MANAGEMENT  
10191 W SAMPLE ROAD  
SUITE 203  
CORAL SPRINGS, FL 33065 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 P  
Name VELAZQUEZ, ANGEL  
Address 10191 W SAMPLE RD  
203  
City-State-Zip: CORAL SPRINGS FL 33065

Title VP  
Name SOMMI, WILLIAM  
Address 10191 W SAMPLE RD  
203  
City-State-Zip: CORAL SPRINGS FL 33065

Title DIRECTOR  
Name INTRIAGO, FREDDY & MARIA  
Address 10191 W SAMPLE RD  
203  
City-State-Zip: CORAL SPRINGS FL 33065

Title SECRETARY  
Name ANDERSON, KAREN  
Address 10191 W SAMPLE RD  
203  
City-State-Zip: CORAL SPRINGS FL 33065

Title DIRECTOR  
Name VIRGIN, LAWRENCE  
Address 10191 W SAMPLE RD  
203  
City-State-Zip: CORAL SPRINGS FL 33065

Title DIRECTOR  
Name BROWN, KIRK & PATRICIA  
Address 10191 W SAMPLE RD  
203  
City-State-Zip: CORAL SPRINGS FL 33065

*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:** ANGEL VELAZQUEZ

P

03/13/2017

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

\_\_\_\_\_  
Date