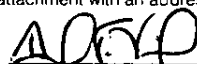


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2008 8:00 am
Secretary of State

03-11-2008 90017 022 ****61.25

DOCUMENT # 732720 1. Entity Name THE VILLAGE TOWNHOUSES-JACARANDA, INC.					
Principal Place of Business 435 NORTH UNIVERSITY DRIVE PLANTATION, FL 33324 US			Mailing Address 435 NORTH UNIVERSITY DRIVE PLANTATION, FL 33324 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
				4. FEI Number 59-1724350	
				Applied For ☐ Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RANDALL K. ROGER & ASSOCIATES, P.A. 621 NW 53RD STREET - SUITE 300 BOCA RATON, FL 33487			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD LEWIS, IRA 435 N UNIVERSITY DR PLANTATION, FL 33324	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD MUNERA, JUAN 401 N UNIVERSITY DRIVE PLANTATION, FL 33324	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD VIDAL, DAN 441 NORTH UNIVERSITY DRIVE PLANTATION, FL 33324	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DEJEAN, AIZAN 407 N UNIVERSITY DRIVE PLANTATION, FL 33324	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD PACKARD, BRIAN 611 N UNIVERSITY DR PLANTATION, FL 33324	☐ Delete ☒ Change	TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD TEICHRE, GEORDIE 471 N UNIVERSITY DR PLANTATION, FL 33324	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D TERWILLIGER, JEAN 545 N UNIVERSITY DR PLANTATION, FL 33324	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD 	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  DANIEL J. VIDAL, PRESIDENT			2/19/08 (305) 972-7380		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		