2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 22, 2008 8:00 am Secretary of State

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DOCUMENT #746365 1. Entity Name CEDAR LANDING AT JACARANDA CONDOMINIUM ASSOCIATION, INC.						02-22-2008 9	90019 018	3 ****6:	1.25
5300 POWEI 200-A	e of Business RLINE RD DALE, FL 33309	Mailing Address 5300 POWERLINE RD 200-A FT. LAUDERDALE, FL 33	3309		4,0000		 		
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Suite, Apt. #, etc. 5300 POWELLINE ROAD, # 2004 5300 POWERLING				200A	01152008	Chg-NP	CR2E037	(12/06)	
	AUDERDONE, Fr.	FORT LAUDERD	<u> </u>		4. FEI Number 59-23023	63		N	oplied For ot Applicable
- Zip 333	309 USA	^{Zip} 33309	Country USA		5 Certificate of		L F	8.75 Ad ee Require	
	6. Name and Address of Current	Registered Agent		_	7. Name and Ad		egistered Ac	jent	
DOL CMC			Name	BAU	baea HER	NI DOOR !	reside	-1T	
DCI - CMS 2035 HARDING ST, STE 200 HOLLYWOOD, FL 33020				Address (F	O. Box Number is	Not Acceptable	FLORID	A	
			City		A TODAL	y WAY		1 750 000	
	•		City	MIRA	mar		FL	Zip Cod	కీయిక
	named entity submits this statement fo tions of registered agent.	r the purpose of changing its re	egistered office o	r registere	d agent, or both, i	n the State of Flo	rida. I am fa	miliar with,	and accept
SIGNATURE .	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: I	Registered Agent signal	ture required t	vhen reinstating)	<u> </u>	DATE	-	
*.	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Camp Trust Fund Co			\$5.00 May Be Added to Fees	Flori	ake check da Departn	nent of S	
10.	•	Trust Fund Co		Ш.,		,Flori	da Departn	nent of S	ate.
10.	Due by May 1, 2008	Trust Fund Co	ntribution.	TRE	Added to Fees DDITIONS/CHANG	,Flori	Ida Departn	nent of S	ate.
	Due by May 1, 2008 OFFICERS AND DIF	Trust Fund Co	ntribution.	TRE	Added to Fees DDITIONS/CHANG	,Flori	ida Departn RS AND DIRE	CTORS IN	10
TITLE	OFFICERS AND DIF	Trust Fund Co	11.	TRE	Added to Fees DDITIONS/CHANG	Flori SES TO OFFICER	Ida Departi RS AND DIRE (CTORS IN	10
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TITLE NAME STREET ADDRESS	Due by May 1, 2008 OFFICERS AND DIF P RODRIGUEZ, ELLEN 9366 SW 1ST ST	Trust Fund Co	11. ITTLE NAME STREET ADDRESS	TRE STE 920 PLA	Added to Fees DDITIONS/CHANG SURE HEN SIG HEN SIG HIS WITH TION,	Flori GES TO OFFICER YEAT AND	RS AND DIRE	CTORS IN	10 ☑ Addition
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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 eath; that I am an officer or director of the corporation or the receiver or project 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 ap-address, with all other like empowered.

SIGNATURE:

MALURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/ma Woodww 423-175