2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746365

FILED Mar 15, 2011 Secretary of State

Entity Name: CEDAR LANDING AT JACARANDA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O ASSOCIATION SERVICES OF FLORIDA

10112 USA TODAY WAY MIRAMAR, FL 33025

Current Mailing Address:

C/O ASSOCIATION SERVICES OF FLORIDA 10112 USA TODAY WAY

MIRAMAR, FL 33025

SKRBIN, GEORGE PRES

10112 USA TODAY WAY

MIRAMAR, FL 33025 US

FEI Number: 59-2302363

ASSOCIATION SERVICES OF FLORIDA

FEI Number Applied For ()

FEI Number Not Applicable ()

P.O. BOX 19439 PLANTATION, FL 33318

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

VALANCY, STEVEN S

311 SE 13 STREET

FORT LAUDERDALE, FL 33316 US

New Principal Place of Business:

1133 S. UNIVERSITY DRIVE # 211

PLANTATION, FL 33324

New Mailing Address:

C/O ALLIANCE PROPERTY SYSTEMS

C/O ALLIANCE PROPERTY SYSTEMS

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: STEVEN S. VALANCY

03/15/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

WOODROW, ALMA DP Name: Address: 9350 S.W. 1ST STREET City-St-Zip: PLANTATION, FL 33324

Title:

Name: CORREALE, ROBIN A D Address: 9326 S.W. 1ST STREET City-St-Zip: PLANTATION, FL 33324

Title:

RENNERT, GERALD D D Name: Address: 9283 S.W. 1ST STREET City-St-Zip: PLANTATION, FL 33324

Title: DT

Name: WILLIAMS, JOHN R DT Address: 9382 S.W. 1ST STREET City-St-Zip: PLANTATION, FL 33324

Title: DS

WOOD, PATTY LYNN DS Name: 9378 S.W. 1ST STREET Address: City-St-Zip: PLANTATION, FL 33324

Title:

MOYER, DEBORAH DVP Name: Address: 9330 S.W. 1ST STREET PLANTATION, FL 33324 City-St-Zip:

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: JOHN WILLIAMS DT 03/15/2011