


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 14, 2008 08:00 AM
Secretary of State**

DOCUMENT # 767333 1. Entity Name ALPINE WOODS OF JACARANDA, PHASE I HOMEOWNERS ASSOCIATION, INC.	
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Principal Place of Business 1080 N.W. 79TH AVE. PLANTATION, FL 33322-5163	Mailing Address 1080 N.W. 79TH AVE. PLANTATION, FL 33322-5163
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01062008 No Chg-NP

CR2E037 (4/06)

4. FEI Number 65-0043369	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent BAEWER, MARY A 7948 NW 10 ST. PLANTATION, FL 33322

**DO NOT WRITE
IN THIS SPACE**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LIGHTER, BARBARA 7902 N.W. 10 STREET PLANTATION, FL 33322
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RODRIGUEZ, BENITO 7937 NW 10TH CT PLANTATION, FL 33322
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP COSTANZO, FLORA 7927 NW 10TH COURT PLANTATION, FL 33322
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BISBIKOS, ERICA 1000 NW 79TH AVE. PLANTATION, FL 33322
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BAEWER, MARY A 7948 N.W 10TH STREET PLANTATION, FL 33322
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000783437
01/16/08-80014-020 61.25

**DO NOT WRITE
IN THIS SPACE**

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:  - Benito Rodriguez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/14/08 (954) 581-0098
Date Daytime Phone #