

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 17, 2003 8:00 am
Secretary of State

01-17-2003 90026 034 ****61.25

DOCUMENT # N00000007982

1. Entity Name

SIENNA CLUB HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

**4788 W. COMMERCIAL BLVD.
TAMARAC FL 33319**

Mailing Address

**4788 W. COMMERCIAL BLVD.
TAMARAC FL 33319**

2. Principal Place of Business

JAL Property Mgmt Inc

Suite, Apt. #, etc. **203**

City & State **10191 W. Sample Rd Coral Springs FL**

Zip **33065** Country **Broward**

3. Mailing Address

JAL Property Mgmt Inc

Suite, Apt. #, etc. **203**

City & State **10191 W. Sample Rd Coral Springs FL**

Zip **33065** Country **Broward**



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-1088189**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SCHACK, EDWARD J
7954 PINES BLVD.
PEMBROKE PINES FL 33024**

7. Name and Address of New Registered Agent

Name **James Calderazzo**

Street Address (P.O. Box Number is Not Acceptable)

c/o JAL Property Mgmt.

10191 W. Sample Rd suite 203

City **Coral Springs**

FL

Zip Code **33065**

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, type or printed name of registered agent and fee, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/7/03

FILE NOW: FEE IS \$61.25

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

TITLE **D** ☐ Delete
NAME **SCHACK, MICHAEL**
STREET ADDRESS **4788 W. COMMERCIAL BLVD.**
CITY-ST-ZIP **TAMARAC FL 33319**

TITLE **D** ☐ Delete
NAME **DELFINO, ALEJANDRO**
STREET ADDRESS **4788 W. COMMERCIAL BLVD.**
CITY-ST-ZIP **TAMARAC FL 33319**

TITLE **D** ☐ Delete
NAME **LOPEZ, CARLOS**
STREET ADDRESS **4788 W. COMMERCIAL BLVD.**
CITY-ST-ZIP **TAMARAC FL 33319**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Michael Schack, President **1/4/03** **814 484,480**

CR2E037 (10/02)