## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00753

FILED Jaņ 16, 2<u>00</u>9 Secretary of State

Entity Name: SPRINGTREE WEST III HOMEOWNERS ASSOCIATION, INC.

FEI Number Applied For ( )

**Current Principal Place of Business:** 

**New Principal Place of Business:** 

C/O J & L PROPERTY MGMT., INC. 10191 W. SAMPLE RD., STE. 203 CORAL SPRINGS, FL 33065

C/O J & L PROPERTY MGMT., INC. 10191 W. SAMPLE RD STE. 203 CORAL SPRINGS, FL 33065

**Current Mailing Address:** 

New Mailing Address:

C/O J & L PROPERTY MGMT., INC. 10191 W. SAMPLE RD., STE. 203 CORAL SPRINGS, FL 33065

C/O J & L PROPERTY MGMT., INC. 10191 W. SAMPLE RD STE. 203 CORAL SPRINGS, FL 33065

FEI Number: 59-2359375

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

J & L PROPERTY MGMT 10191 W SAMPLE RD - 203 POMPANO BEACH, FL 33065 J & L PROPERTY MGMT 10191 W SAMPLE RD - STE 203 CORAL SPRINGS, FL 33065

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:

Name:

01/16/2009

Electronic Signature of Registered Agent

US

Date

**OFFICERS AND DIRECTORS:** 

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

() Change () Addition

() Delete ADMAGNI, STEVE Name:

9485 NW 45TH PL Address: City-St-Zip: SUNRISE, FL 33351 US

Title: () Delete REED, DONNA Name: Address: 9448 NW 45TH PLACE

City-St-Zip: SUNRISE, FL 33351 Title: () Delete CATLIN, THERESA

4510 NW 95 AVE Address: City-St-Zip: FORT LAUDERDALE, FL 33351

( ) Delete Title: Name: BRONDELLA, DAVE

Address: 4505 NW 94 AVE City-St-Zip: FORT LAUDERDALE, FL 33351

ROMAGNI, STEVE

9485 NW 45TH PL

SUNRISE, FL 33351 US

Address: City-St-Zip:

Name:

Title:

Name:

Address:

City-St-Zip:

Title: (X) Change ( ) Addition

Name: CATLIN, THERESA 4510 NW 95 AVE Address: City-St-Zip: SUNRISE, FL 33351

Title: (X) Change ( ) Addition

Name: BIONDELLA, DAVE 4505 NW 94 AVE Address: City-St-Zip: SUNRISE, FL 33351

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JAMES CALDERAZZO RΑ 01/16/2009